

The 8th Workshop in Information Security Theory and Practice

30 June – 02 July 2014, Crete, Greece

ALDEMAR HOTELS
Hersonissos, Crete, Greece

FAX or E-MAIL RESERVATION FORM

Please, fill in this form and send it directly to the Katre Holidays at the fax number:
+30-2810-330606.

Conference reservation dpt. E-mail: heraklion@katrea.gr Tel: +30-2810-255552

Contact Information:

First name: _____ Last name: _____
Affiliation: _____
Address: _____
City: _____ Zip code: _____ Country: _____
Email: _____ Home phone _____
Work phone _____ Fax _____

Booking Information:

Booking period _____
Arrival date: _____
Departure date: _____
Number of Nights: _____

Please select the hotel of your choice

ALDEMAR Knossos Royal Village Hotel*** – Conference Venue**

Room Type	No of Rooms	Price (per room per day) in euros
Single Bungalow	_____	129, 00 Euros Bed and Breakfast Basis
Double Bungalow	_____	160, 00 Euros Bed and Breakfast Basis
Triple Bungalow (with adult)	_____	214, 00 Euros Bed and Breakfast Basis
Triple Bungalow (with child 02 – 12 years)	_____	160, 00 Euros Bed and Breakfast Basis

The dead line for reservations is until 31/05/2014. After 01/06/2014 the reservations will be "on request" basis.

Number of Adults: _____ Number of children: _____

Payment and Cancellation Policy:

You will pay directly at KATREA HOLIDAYS Ltd. Cancellation details as below

- For all cancellations made by the participants until **31.05.2014** there will be no cancellation fees
- For all cancellations of the reserved rooms made from **01.06.2014** until **26.06.2014** there will be a charge equal to 1 overnight, for the cancelled rooms.

For all cancellations made the arrival day or/and for **NON-SHOW** guests, there will be a charge equal to the total reserved overnights.

Credit Card Information:

In order to confirm your reservation, please provide your credit card information.

Card Type: _____ Name on Card: _____
Card Number: _____ Expiry Date: _____
Card validation code (CVC): _____
Authorized Signature: _____

We should contact you on:

Phone (home) _____ Phone (work) _____ Fax _____ E-mail _____

Please indicate hours: _____

Additional Information & Wishes: _____