



ACCOMMODATION FORM



Nursing Home Research International Working Group
13, 14 and 15 October 2017 - St. Louis, USA

PARTICIPANT: Please use **capital letters** to fill in this accommodation form – *This form is for 1 person only*

Mr Mrs Ms **NAME** _____ **FIRST NAME** _____
EMAIL _____ @ _____ **PHONE** : _____
ADDRESS _____ **POST CODE** _____
CITY _____ **COUNTRY** _____

The collected data are subject to IT processing dedicated to the treatment of your hotel booking within the framework of the mentioned congress. Partial information (name, surname, type of room, check-in and check-out date, guarantee), will be transmitted to the selected hotel.

HOUSING: Request will be on a first come first served basis - Tick the boxes of your choice- Please indicate **IMPERATIVELY** your choice

Check In: ----- **October 2017** **Check Out:** ----- **October 2017** **Number of nights:** -----

Choice 1	Choice 2	Hôtels suggested	Distance to Congress Location	<input type="checkbox"/> Single (1)	<input type="checkbox"/> Double <input type="checkbox"/> Twin(1)	Information
<input type="checkbox"/>	<input type="checkbox"/>	1 – HOTEL COURTYARD DOWNTOWN WEST ***	1.5 miles from campus	\$ 137	\$ 137	Breakfast Not Included
<input type="checkbox"/>	<input type="checkbox"/>	2 – HOTEL HOLIDAY INN EXPRESS ST LOUIS CENTRAL WEST END ***	1.5 miles from campus	\$ 139	\$ 139	Breakfast Included
<input type="checkbox"/>	<input type="checkbox"/>	3 – HOTEL PEAR TREE INN ST LOUIS UNION STATION ***	2.6 miles from campus	\$ 125	\$ 140	Breakfast Included
<input type="checkbox"/>	<input type="checkbox"/>	4 – HOTEL HOLIDAY INN DOWNTOWN CONVENTION CENTER ***	3 miles from campus	\$ 149	\$ 149	Breakfast Included
<input type="checkbox"/>	<input type="checkbox"/>	5 – HOTEL HOLIDAY INN FOREST PARK ***	3 miles from campus	\$ 155	\$ 165	Breakfast Included

(!) The above rates are per room, for 1 night. Federal Tax 15,929% not Included

Special requirements :

GUARANTEE:

The booking will be guaranteed by your credit card and KRIS EVENTS do not apply any charge. The entire stay will be paid directly to the hotel upon check out time.

Visa/Eurocard/Mastercard American Express Diners

I, the undersigned, _____ (Name of the card holder) allow KRIS EVENTS to forward my credit card details here mentioned to the hotel in order to confirm and guarantee the booking:

N° Expiry Date / CVC Code*

Card Verification Code: 3 digits for Visa on the back of the visa card (4 digits for American Express)

Date / Signature:

CANCELLATION POLICY:

The booking will be confirmed by return mail. From this date, the booking guaranteed by credit card will be firm and final. For any cancellation received after **September 1st, 2017**: 100 % penalty and no-show charged. In case of non-compliance of the cancellation policy, any penalty for this modification will be automatically charged by the hotel on the credit card here mentioned.

♦ I understand that by signing this form, I accept the above conditions and payment terms.

To send back by email before 1st September 2017 to:

Date & Signature:

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