

Reservation Form– Conference “11th Organization Studies Workshop” 19-21 May 2016

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| Name:…………………………………………………Surname:……………………………………………………………... No. of adults:…………………..No. of children: ………………………...Ages:……………...........................Arrival Date:……………… Departure Date:………….. No. of rooms:..……Room type:……..Address:…………………………………………………………………………………………………………….................Tel:……………………………………………………….Cell:…………………………………………………….................Fax:………………………................................................Email:…………………………………..................

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| **ROOM TYPE** | **ROOM DESCRIPTION** | **DAILY RATE** |
| **A** | SINGLE STANDARD ROOM R.O.H | 140 euro on Half board |
| **B** | DOUBLE STANDARD ROOM R.O.H | 170 euro on Half board |
| **C** | SINGLE SEA VIEW ROOM R.O.H | 180 euro on Half board |
| **D** | DOUBLE SEA VIEW ROOM R.O.H | 210 euro on Half board |

Non-smoking room: Yes No Transfer upon arrival/departure: Yes NoArrival time:............ Departure Time:…………Boat/Flight number:..............................Do you wish to make your stay more convenient: hire a car at a special rate? Yes NoCredit card: AMEX / VISA / MASTER Credit card holder:………………………………………………………………………………………………….Credit card No:……………………………………………………………………………………………………...Exp. date:…………………………………………….. CVV:………………………………………………………Authorization:FULL NAME:……………………………………………………………………………………………………….SIGNATURE:……………………………………………………………Date:……………………………………**Cancellation Policy**For cancellations up to the March 15th 2016, no cancellation fees.For cancellation between 16th March until 15th April, 50% of the total cost will be charged to your card.In any other case or in case of non-show 100% cancellation fees.Please send back filled & signed at fax number: 0030 22890 28751SAINT JOHN HOTEL VILLAS & SPA - MYKONOSAGHIOS IOANNIS BEACH, P.O. BOX 626, 84600, GREECETEL:+30 22890 28752, FAX:+30 22890 28751reservations@saintjohn.gr, www.saintjohn.gr |