|  |  |
| --- | --- |
| **Domus Park Hotel Tuscolana (3 stars)**  **Via Tuscolana 12, Frascati** |  |

**a. Rates:** Single Room: € 95; Double Room: € 125;

**b. Distance to the venue:** The hotel is about 8 km from the conference venue. The hotel can provide discounted prices for taxi renting, please contact the reception.

**c. Booking:** send the form available in the following paper to the travel agency at the following mail address ([efma2014@glieventi.it](mailto:efma2014@glieventi.it)). You will receive your hotel voucher in 48 hours

**d. Description of hotel plus facilities:**

Domus Hotel is set in an ancient villa surrounded by a large green park and located in the pleasant Castelli Romani area, immediately out of Rome.

The Domus is the ideal place to spent relaxing moments in proximity of the eternal city or to run business in a relaxed ambiance. Each room is fully equipped with all common facilities.

The Taberna restaurant, offers modern and cosy atmosphere and an innovative cuisine based on traditional foods, accompanied by a wide selection of wines. Open daily, the restaurant is also ideal for ceremonies and special events.

**Website:** <http://www.tuscodom.it/>

**European Financial Management Association**

**2014 Annual Meeting**

**June 25th – 28th, 2014**

**Rome, ITALY**

**HOTEL RESERVATION FORM**

Complete with the number of Room required. Price are per room, per day and include breakfast and service

|  |  |  |  |
| --- | --- | --- | --- |
| Cognome / Surname | | Nome / Name | |
| Indirizzo / Address | | | |
| CAP / ZIP Code | Città / City | | Prov. / Country |
| Telephone | | Fax | |
| Società / Affiliation | | | |
| Data di Arrivo / Arrival date \_ \_ / \_ \_ / 2014 | | Data di Partenza / Departure date \_ \_ / \_ \_ / 2014 | |
| Notti / Number of Nights \_ \_ | Accompagnato da / Guest full name …………………………………….............. | | |

Hotel: **HOTEL DOMUS PARK TUSCOLANA**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| N. Single Rooms: |  | N. Double Rooms Single Occupancy: |  | N. Double Rooms: |  |

I authorize the Hotel to deduct all nights price from the credit card. The rate selected does not allow modifications of cancellation.

 American Express  Mastercard / Eurocard  Visa

Numero Carta/ Card number……………………………………………………………………………………………………………………......

Titolare Carta / Card owner …………………………………………………………………………………………………………………………..

Data di Scadenza / Expiration date …………………………………………………………………………………………………………......

Numero Carta/ Card number……………………………………………………………………………………………………………………......

 I hereby authorize to add my personal details to the travel agency mailing list in accordance to the Italian legislative decree 196/2003. I may have access to my personal details at any time and I can request their modification and cancellation.

|  |  |
| --- | --- |
| Data / Date | Firma / Signature |
| \_ \_ / \_ \_ / 2014 | ……………………………………………………………………………… |

Please send the reservation form to [efma2014@glieventi.it](mailto:efma2014@glieventi.it) and you will receive the Hotel voucher in 48 hours.