

1st**EUROPEAN
CONGRESS OF
MEDICAL
PHYSICS**September 1-4, 2016
Eugenides Foundation
Athens-Greece

Please fill out this form and send by fax or e-mail to the Congress Secretariat
PRC CONGRESS & TRAVEL, 105 Michalakopoulou str., 115 27 Athens, Greece
 Tel.: +30-210-7711673, 7756336, Fax: +30-210-7711289, E-mail: ecmp2016@prctravel.gr

ACCOMMODATION FORM**PARTICIPANT'S DETAILS**Professor. Dr. Mr. Mrs.

Family Name:

First Name:

Institution / Department:

Professional Title:

Street:

City:

Zip-code:

Country:

Tel.:

Fax:

E-mail:

ACCOMPANYING PERSONS DETAILS**1st PERSON** Mr. Mrs. Child

Family Name:

First Name:

2nd PERSON Mr. Mrs. Child

Family Name:

First Name:

Arrival Date:**Departure Date:****HOTELS**

Hotel	Type of Room	Cost per night	No of Nights	Total Cost
Metropolitan Hotel 5*	Single Standard	€ 135,00		
	Double Standard	€ 145,00		
	Single Sea View	€ 165,00		
	Double Sea View	€ 175,00		
	Single Executive	€ 195,00		
	Double Executive	€ 205,00		
Coral Hotel 4*	Single Standard	€ 85,00		
	Double Standard	€ 90,00		
Glyfada Hotel 3*	Single Standard	€ 70,00		
	Double Standard	€ 80,00		
	Single Sea View	€ 80,00		
	Double Sea View	€ 90,00		
London Hotel 3*	Single Standard	€ 60,00		
	Double Standard	€ 65,00		
Total cost				

- Check in time 15:00 – Check out time 11:00
- **Reservation deadline for above recommended hotels is May 25th, 2016.**

 Non-smoking room Smoking room Room for disabled person Difficulty in moving

Other requirements:

- For any other special room requests (triple rooms, suites etc.) kindly contact PRC Congress & Travel.
- Reserved rooms will be held for participants till 12:00 hrs the next day; otherwise it has to be specified by the participant.
- All requirements will be confirmed upon request, depending on the availability.
- The Professional Congress Organizer reserves the right, upon delegate's agreement, to transfer the room reservation to a hotel (in close proximity) other than the one initially selected, in case there are no available rooms.

METHOD & CONDITIONS OF PAYMENT

Hotel booking must be accompanied by full payment of the total cost and it will only be valid upon receipt of the full payment.

Personal cheques and Eurocheques are not acceptable.

Payment can be completed either by bank transfer or by credit card (Visa and Mastercard).

According to the selected method of payment, kindly fill the required fields below.

1. BANK TRANSFER

I have transferred the total amount of Euro to the following bank account of PRC CONGRESS & TRAVEL as a full payment for my accommodation to the **ECMP 2016**

Bank Account

Bank: ALPHA BANK

Beneficiary Name: IORDANIS CHALIVIDIS & SIA E.E

Account Number: 130 00 2320001056

IBAN: GR 6001 4013 0013 0002 3200 01056

Swift Code: CRBAGRAAXX

- Kindly make sure that your name is noted on the swift bank order and that **respective bank commission has been subduced**
- **Bank Charges are not shared - Bank Expenses should be covered by yourself**
- The bank receipt must be forwarded to PRC Congress & Travel along with this form, by e-mail or fax in order your accommodation to be confirmed

2. CREDIT CARD

I hereby authorize PRC CONGRESS & TRAVEL to immediately charge my credit card mentioned below with the amount of Euro as a full payment for my accommodation to the **ECMP 2016**

Credit Card Details

Visa _____ Mastercard _____

Card Holder's Name: _____

Card Number: _____

Expiry date: _____

CVV Number (last 3 digits at the back of the card): _____

Card Holder's Signature:

- Card holder's original signature is required to proceed with the accommodation
- A photocopy of both sides of the credit card forwarded along with your Accommodation Form is mandatory
- **Please note that there is a 3% commission on credit card for bank charges.**

CONFIRMATION OF ACCOMMODATION

Your accommodation will be confirmed, as soon as PRC Congress & Travel has received the Accommodation Form dully filled with all required details and the payment transaction has been completed. You will receive a confirmation letter for your hotel reservation to the e-mail address mentioned in the Accommodation Form.

CANCELATION POLICY

All cancellations must be submitted in writing to the Congress Secretariat by email: ecmp2016@prctravel.gr
Please note that accommodation expenses are subject to the Cancellation & Refund Conditions below:

Time Period	Cancellation Fee
Up to April 25 th , 2016	Full refund
From April 26 th , 2016 onwards	No refund will be granted

All refunds will be made within two months after the end of the Congress. Bank charges will be deducted.

I hereby confirm that I have read and agree with all prices, terms, conditions and cancellation policy for my accommodation in ECMP 2016.

Date: ____/____/____

Signature: _____