

Accommodation at the Hostel Masarykova kolej

Thakurova 1, Prague 6, Czech Republic

DEADLINE FOR BOOKING: February 11, 2008

After that date we cannot guarantee your booking request

TO BE FAXED TO: (+420) 267 310 503

LAST NAME:.....FIRST NAME:.....

TITLE: Mr./Mrs./Ms./Dr./Prof.ACCOMPANYING PERSON:.....

TELEPHONE NO: FAX NO:

E-MAIL: TOTAL NO. OF NIGHTS REQUIRED:.....

ARRIVAL DATE: DEPARTURE DATE:

ARRIVAL TIMEDEPARTURE TIME

PAYMENT –Hostel Masarykova kolej

Payment by credit CARD

ACCOMMODATION

Double room for a SINGLE USE
1200 CZK x ____NIGHTS =

DOUBLE ROOM: 1400 CZK x ____NIGHTS =

TOTAL: CZK

Dates available: March 25 – 30, 2008

CREDIT CARD DETAILS

VISA* MASTERCARD/EUROCARD*
AMEX JCB DINERS CLUB

NUMBER:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

LAST 3 DIGITS:
(on the signature strip - the reverse side)

EXPIRE:

NAME ON CC:

I, the undersigned, authorise the
Action M Agency to charge to my
credit card the total amount of

_____CZK

YOUR SIGNATURE:

Payment by BANK TRANSFER

yes

no

Payment to be sent to the Czech Republic,
Komerční Banka Praha 10, nam. Kubánské
revoluce 15, Milena Zeithamlová - Action M
Agency,

SWIF CODE: KOMBCZP,
CZK account 221442101/ 0100.
IBAN CZ 0801000000000221442101

Please make sure that the bank transfer is
made net of all bank charges and
commissions.

NAME OF THE PAYER:

NAME OF THE BANK:

ACCOUNT NUMBER:

DATE OF PAYMENT:

Cancellation Policy

- cancellation received by March 3, 2008
no charges
- cancellation received after March 3, 2008
results in **one night room charge**

PRINT & FAX

Thank you