

ITRS Spring Meeting Europe
April 6 & 7, 2006
Dolce Kasteel Vaalsbroek - Maastricht
Hotel Registration Form

Please fill out and return **before March 20, 2006** to:

Please send to either Wout's or Veronique's attention at: reserveringen@vaalsbroek.nl

Tel: +31 43 308 9350 Fax: +31 43 308 9333

(Please Print your Name)

Family Name _____ Ms. Mr.

First Name _____

E-Mail _____

Assistant's Name _____ Email _____ Tel# _____

Location
(country/city)

My Arrival

My Departure

Arrival date _____ Departure date _____

Arrival flight/time _____ Depart flight / time _____

Credit Card number _____ Expiration Date _____

Yes, I will be late check-in after 18:00

I require a hotel room at Dolce Kasteel Vaalsbroek

From April _____ for _____ Night(s) _____

Special Requirements

Food: Vegetarian Non-Vegetarian Others

Room: Smoking Non-Smoking

Note:

1. Participants shall pay their own hotel bill and traveling expenses. Please note that any reservation received after the cut-off day, **March 20, 2006**, rooms will be subject to availability. In the event of no show, the hotel will automatically post charge to the registered guest's account.

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