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| **Hotel Holiday Inn Express San Giovanni (4 stars)**  **Via Assisi 53, Roma** |  |

**a. Rates:** Double Room single use: € 103; Double Room: € 117.

**b. Distance to the venue:** The hotel is less than 1 km from the subway station Ponte Lungo (line A). In order to get to the conference venue, take the subway till Anagnina (end of line) and take the bus 20 or 20 express till the stop “Facoltà di Economia” .

**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:**

This Holiday Inn Express has great links to both the historic centre of Rome and Fiumicino Airport. Set next to Tuscolana Train Station and a 5-minute walk from Ponte Lungo Metro Station on line A, it offers a 24-hour front desk. Rooms at the Holiday Inn Express Rome San Giovanni feature a 32-inch LCD TV with Sky channels, air conditioning, and a private bathroom. They all include anatomical mattresses, a work desk, and tea and coffee making facilities. A generous buffet breakfast is served in the breakfast room overlooking the spacious internal courtyard. Guests will also find a bar and a luggage storage room.\*\*2EUR City tax per person and night, direct payment at the hotel.

**Website:** <http://www.hotusa.com/hotels/italy/rome/hotel-h-i-express-rome-san-giovanni.html>

**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

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| --- | --- | --- | --- |
| 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: **HOLIDAY INN EXPRESS SAN GIOVANNI**

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| --- | --- | --- | --- | --- | --- |
| 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 | ……………………………………………………………………………… |

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