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| **Hotel Mercure Colosseo (4 stars)**  **Via Labicana 144, Roma** |  |

**a. Rates:** Single Room: € 145, Double Room single use: € 170; Double Room: € 185.

**b. Distance to the venue:** The hotel is about 1 km from the subway station Manzoni (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 four-star hotel in the heart of Rome is 219 yds (200 m) from the Coliseum and the metro station, and is close to the business district (E.U.R.) and the main archaeological sites, monuments and museums, making it ideal for both business trips and vacations. The hotel offers 160 rooms, some with a view of the Coliseum, and all with satellite TV, safe, air conditioning and heating, as well as an open-air pool and panoramic terrace (open end of May through Sept) and 2 bars.

**Website:** <http://www.mercure.com/gb/hotel-2909-mercure-roma-centro-colosseo/index.shtml>

**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: **HOTEL MERCURE COLOSSEO**

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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 | ……………………………………………………………………………… |

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