PM-05: Advancing Project Management for the 21st Century
"Concepts, Tools & Techniques for Managing Successful Projects"
Moevenpick Resort & Thalasso Hotel, Heraklion,
Crete, Greece, 29-31 May 2010

ACCOMODATION & TOURS FORM

Please fill in this form in CAPITAL LETTERS and tick where appropriate. This form is for one congress delegate only. Please send this form by fax or e-mail:

FREI S.A. Travel Congress
ERS & ISIAN 2008 Professional Congress Organizer
3 Paparigopoulou Str 10561 Athens Greece
Tel: +30 2116005660, +30 2103215600 Fax: +302103219296
Email: 2010@pmgreece.gr & info:frei.gr

Personal details

Please complete this section accurately. The information you provide will allow us to correspond with you efficiently.

Family Name _____ Initials _____ First Name _____

Title □ Prof. □ Dr. □ Mr. □ Mrs. □ Ms. □

Mailing Address □ Office □ Residence

_____

Institute Dept.

_____

No. Street. Suite/Apt.

_____

City State/Province Country Postal Code

_____ _____

Telephone (office hours): Country code/city code/number Telephone (personal): Country code/city code/number

_____ _____

Fax: Country code/city code/number E – Mail Address

ACCOMODATION

Please select from the list below (hotel and room type)

HOTEL	HOTEL CLASS	ROOM TYPE & RATE SINGLE (superior, sea view)	ROOM TYPE & RATE DOUBLE (superior, sea view)
Movenpick Hotel	De Lux	110 €	130€

Minimum stay at the hotel 2 nights.
All rates are per room, per night, including breakfast, service, taxes. Early reservation is highly recommended.

Reservation: When booking, please complete this hotel reservation form and return to FREI S.A. TRAVEL-CONGRESS, no later than May **15th, 2010**. Requests will be accepted thereafter; however, hotel accommodation is subject to availability and cannot be guaranteed.
After this deadline, bookings are only possible against full payment by credit card or bank transfer.

Type of room required □ Single □ Double □ Other

_____ _____ _____ Cost: € _____

Check In Date Check Out Date Total night/s

*I will share my accommodation with: _____

TRAVEL REQUIREMENTS

In case you wish us to book your tickets. Kindly fill in the following:

Date: _____ Morning: □ Afternoon: □

From: _____ To: _____ Return □ Yes □ No

Transfer from Heraklion Airport to Hotel: □ Return □ Yes □ No

By Taxi: □ or Car Hire: □ Preferred Car Type: _____

CONGRESS TOURS

TOUR CODE	DATE	COST	NUMBER OF PERSONS
Knossos / Heraklion	29/05/2010	60€	
Spinalonga /Aghios Nikolaos	30/05/2010	70€	
Fodele/Chania/Rethymnon	31/05/2010	80€	

Total Cost _____

Minimum number of participants for all the tours are 25
In case of low participation at any tour, full refund will be made.

PAYMENT

Please indicate the amount enclosed and preferred mode of payment. Ensure that you send your fully completed accommodation form together with your payment:

Option 1: On Line Payment

On line payment is also possible on www.2010.pmgreece.gr form. Please note that this is payment on a Secure environment via bank

□ **Option 2: Credit Card**

□ **Visa** □ **MasterCard**

Number

Expiry Date (Month/Year)

Name as shown on card:

Family Name

First Name

_____

Signature printed form only

Date (day/month/year) Passport Number

By signing this form you authorize FREI S.A. TRAVEL-CONGRESS to charge the above credit card for the balance of your account **one month** prior to your arrival for services ordered.

Option 3: Bank Transfer – with your name and address indicated on the reverse. If payment is made for more than one person or by a company please makes sure all names are indicated and send fully completed accommodation forms together with a copy of the bank transfer. Please make drafts payable to FREI S.A.:

ALPHA BANK	
ACCOUNT NUMBER:	120 0023 20005353
IBAN CODE:	GR 290 140 1200 1200 0232 0005353
SWIFT CODE:	CRBAGRAAXXX

Bank charges are the responsibility of the payee and should be paid at source in addition to the accommodation fees.

Cancellation Policy:

Written cancellations received between 5th, March 2010 and 25th, April 2010 will be charged with cancellation fees equal to 50% of the total amount

Written cancellations received from 26st, April 2010 and non shows **full cancellation fees will be applied**

All refunds will be processed one (1) month following the end of the Congress.

Early Departure Fee: Guests will be charged for checking out prior to the departure date (2 nights)

All changes or cancellations have to be made in writing to FREI S.A. TRAVEL-CONGRESS.
Please do not contact the hotel directly.

Date:_____ Signature:_____