DAARC 2011 FORM 2/2

The 8th Discourse Anaphora and Anaphor Resolution Colloquium 6 and 7 October 2011, Faro, Algarve, Portugal

Accomodation Form Hotel Faro

Circh Name .		, tel 1 al 0
First Name :		
Last Name :		
Address:		
City:	Zincode:	Country:
E-mail:		Country.
Phone:		
		dged by reservas@hotelfaro.pt)
Room rates		
	(1 person). Price r	per room per night: €68.50 euros
		per room per night: €84.50 euros
Prices are including bre	` ' ' ' '	ser room per migner eo niso euros
In case of charing a rec	am with ather particir	nant of the conference, places indicate his/her
name:	in with other particit	pant of the conference, please indicate his/her
	loes not need to fill in	n this Accomodation Form, but he or she does nee
to send an individual co		
	-	
Arrival date:		Foreseen Arrival time:
Departure date:		Number of nights:
Total in Euros:		
The hotel has a 72 hou	r cancelation policy.	
Bank Transfer		
	ink transfer, please ei	enclose a copy of the transfer order form. To
		ther one night or the full amount in advance.
guarantee your booking	y you moduled pay and	and the inghe of the fan amount in davance.
Account holder: Hotel F	aro – Hotmanageme	ent Exploração e Gestão Hoteleira, Lda.
IBAN: PT50 0032 0189		μ
BIC/SWIFT code: BARC		
Bank address: Barclays	s, Estrada Nac. 125, k	Km 83,4 Benfarras, 8125 Vilamoura - Quarteira
Reference: Your Name,	DAARC2011	
Credit Card	_	
I authorise the amount	ofEuro	os to be charged on my credit card.
[] Visa	rcard [] Euroc	card [] American Express
Credit Card Number:		
CVV (3 rightmost digits	on the back of the c	card):
	Card Holders' na	ame:
Signature:		
Hotel Reservation		
Send this reservation for	orm by Fax to Hotel F	Faro:
Eav 1251 200		·

Fax. +351 289 830 829

Hotel Faro, Sra. Paula Rodriques To:

DAARC2011 Subject:

For more information: Telephone: +351 289 830 830 or e-mail: reservas@hotelfaro.pt

For this reservation to be complete, The Registration Form 1/2 has also to be received by the University of Lisboa.