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STILLORGAN PARK HOTEL
RESERVATION REQUEST FORM
BIOELECTROMAGNETICS 2005

ROOM DETAILS

Date of Arrival: _____ No. of Nights: _____

Room Type: Single €132 Double Occupancy €160 Double Occupancy with 2 Twin Beds €160
(includes tax and a full Irish breakfast)

No. of People in room: _____

GUEST DETAILS

Guest Name: _____

Company Name: _____

Contact Address: _____

Contact Name: _____ Email: _____

Phone: _____ Fax: _____

Smoking: Non smoking:

C/C Number to secure: _____ exp: _____ type _____

Deposit to be forward: _____

REQUESTS

Hotel Contact Information: Stillorgan Park Hotel, Stillorgan Rd., Dublin 4, Ireland
Telephone: +353 01 288162 Fax: +353 01 2831610, Reservations@Stillorganpark.com

HOTEL USE: Provisional Chase Confirmed Fax/e-mail to be sent

Name: _____ Date: _____ Res No: _____