

Windhover Information/Medtech Insight 25/27 April 2007

In3 Europe April 26-27, 2007

FAX: 06 59 40 813 or by Email: sales.sheratonrome@sheraton.com

Conference Site: Sheraton Roma Hotel & Conference Center
Viale del Pattinaggio, 100 – 00144 Roma, Italia

First Name: _____ Last Name: _____
Company: _____
City, State, Zip: _____
Country: _____
Tel: _____ Fax: _____
Email: _____
Arrival Date: _____ Departure Date: _____

Hotel Check-in: 3:00PM Hotel Check-out: 10:00AM

Room Type (rates are inclusive of buffet breakfast and taxes actually in force; any legislative change will be automatically applied):

Classic Room	Double Room single occupancy	Euro 213,00 per night	
	Double occupancy	Euro 238,00 per night	
Club Room	Double Room single occupancy	Euro 253,00 per night	
	Double occupancy	Euro 278,00 per night	
	NON SMOKING	SMOKING	

I guarantee my reservation by credit card (mandatory)

Credit card information ___ Visa ___ MasterCard ___ American Express ___ Other

Card Number _____ Expiration Date _____

Card Holder: _____ Signature: _____

Hotel Confirmation No.: _____

(This section to be completed by the hotel)

Hotel Reservation Policy:

Reservations must be made through The Sheraton Roma. A block of rooms has been reserved
Cut off date March 21. After that date all reservations are subject to hotel availability.

Room availability is limited. Cannot guarantee room availability prior to or after the
conference. If you plan to arrive before or stay after the conference, please return this form
immediately to The Sheraton Roma.

Cancellation Policy: Reservations may be cancelled up to 72 hours prior to arrival date. All
other cancellations and no-shows are subject to a one night room and tax charge.