

# VIII<sup>th</sup> International Congress of Cardiology & Cardiac Surgery

April 18-21, 2007

Please send this form to INFOMED International for Events s.a.r.l P.O.Box: 90-361 Beirut, Lebanon  
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## HOTEL RESERVATION FORM

### 1 Personal Data

Mr.  Mrs.  Ms.  Dr.  Pr.

- Last name (Family name) \_\_\_\_\_
- First name (Given name) \_\_\_\_\_
- Address \_\_\_\_\_  
\_\_\_\_\_
- Postal / Zip code \_\_\_\_\_ • City \_\_\_\_\_
- State / Province \_\_\_\_\_ • Country \_\_\_\_\_
- Telephone \_\_\_\_\_ • Fax \_\_\_\_\_
- E-mail (compulsory field) \_\_\_\_\_
- Your specialization is (mandatory to process your application): \_\_\_\_\_

### 2 Accomodation

I definitely reserve  Single Room  Double Room  Twin-Bedded

Date of Arrival  Time  Flight   
Date of Departure  Time  Flight

### 3 Hotel Category

**Habtoor Grand Hotel (Congress Venue)** SGL DBL

**Grand Club** \$250 \$290

**Deluxe Executive** \$225 \$250

**TOTAL**

**Metropolitan Palace Hotel (Connecting Venue)** SGL DBL

**Panoramic** \$190 \$210

**Deluxe** \$165 \$190

**Superior** \$145 \$165

**TOTAL**

SGL DBL

**Category 5\*\*\*\*\*** \$140 \$150

**Category 4\*\*\*\*** \$90 \$100

**Category 3\*\*\*** \$65 \$75

**TOTAL**

Rates are per night including continental breakfast. Please note that these prices are subject to 10% V.A.T.

