

International Symposium on Utilization of Accelerators
São Paulo, Brazil
26 – 30 November 2001

HOTEL RESERVATION FORM

This form should be completed and sent as soon as possible but in any case before **19 November 2001**. No reservation can be guaranteed after that date. Please send to:

Ms. Maria Helena de Oliveira Sampa
Fax: +5511 3816 9186
E-mail: isua2001@net.ipen.br

Family Name (Mr./Ms.): _____ First Name: _____
 Postal Address: _____
 Country: _____ Tel. No.: _____ Fax. No.: _____
 E-Mail Address: _____

HOTEL	Single	Double	No. of nights	Total
Hilton Hotel	US\$ 80,00	US\$ 160,00		

The hotel rate includes lunches (from Monday to Friday), a welcome cocktail, coffee breaks and the closing dinner.

Arrival Date / Time: _____ Flight No.: _____
 Departure Date / Time: _____ Flight No.: _____

Payment Conditions:

Payment should be made in cash (in US\$ or Brazilian R\$) at the Symposium Registration Desk.

One night deposit will be charged in case of no-show or late cancellation (cancellation received within 72 hours prior to arrival date).

DATE: **SIGNATURE:**