



**33rd Annual Meeting of the European Finance Association (EFA 2006)
Zurich/Switzerland, August 23 - 26, 2006**

Hotel Reservation Form (one form per room)

Mr Mrs Prof. PD Dr.
Family name (please underline) / First name, Initial

To be returned before July 27, 2006 to:

Accompanying person

Hospital/Institute / Company

Department

Street, No.

AKM Travel AG
Messeplatz 10
P. O. Box
CH-4016 Basel
Switzerland

Fax: ++41 61 690 94 14

P. O. Box Postal code/Zip code City

Country State/County (where applicable) E-mail

Telephone business Fax Telephone home

Date of arrival: _____ Estimated time of arrival: _____

Date of departure: _____ Number of nights: _____

Arrival by car train airplane

Hotels	Single room	Double room
Price-Category A	<input type="checkbox"/> € 145 – 170	<input type="checkbox"/> € 180 – 210
Price-Category B	<input type="checkbox"/> € 115 – 145	<input type="checkbox"/> € 145 – 180
Price-Category C	<input type="checkbox"/> € 85 – 115	<input type="checkbox"/> € 115 – 145

All rates are per room and per night, including breakfast, service and taxes.

Reservation

When booking, please complete this hotel reservation form and return it to AKM Travel AG, Basel, not later than **July 27, 2006**. Requests will be accepted thereafter, however, hotel accommodation is subject to availability and cannot be guaranteed. **After this deadline, bookings are only possible against full payment by credit card, and an extra handling fee of € 30 will be charged.**

Payment Policy

To guarantee your reservation a **deposit of € 200** is required. Please include either a copy of your bank transfer to our account at the UBS AG, or provide a credit card that we shall debit. Upon receipt of the deposit, each participant will receive a final confirmation with an invoice. **Full payment has to be made to AKM Travel by July 27, 2006.**

Please indicate form of payment for the deposit:

Bank transfer – free of charge for recipient – to the account of AKM Travel at UBS AG, CH-4002 Basel
Account No. 233-595.400.60G clearing No. 233, IBAN No. CH95 0023 3233 5954 0060G, Swift: UBSWCHZH80A

Visa Mastercard CVV2 Code _____

No. _____ Exp. date _____ Cardholder's name: _____

All room charges must be prepaid to AKM Travel AG. However, when checking out, all extras (mini-bar, telephone charges, room service, etc.) must be settled with the hotel directly.

Cancellation Policy

If your hotel reservation is cancelled before **July 27, 2006**, the deposit will be refunded less € 60 handling fee. If your reservation is cancelled after **July 27, 2006**, or if you arrive later or leave earlier than on the dates indicated on your reservation form, the total accommodation amount will be charged and no refunds can be made. Any change of reservation will be subject to a handling fee of € 30. Changes or cancellations have to be made in writing to AKM Travel AG, Basel. Please do not contact the hotel directly.

Date: _____ Signature: _____

The participant acknowledges that he/she has no right to lodge damage claims against the organizers should the holding of the congress be hindered or prevented by unexpected political or economic events or generally by force majeure, or should the non-appearance of speakers or other reasons necessitate program changes. With reservation, the participant accepts this proviso.