

# Telefax Reservation Form



**Pension St. Josef (\*\*\*)**  
 Hirschengraben 64  
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<b>Fax to:</b>	<b>+41 (0)44 251 28 08</b>	Booking code:	<b>EMC Zurich 2009</b>
Availability of rooms:	<b>January 10 – 18, 2009</b>		
Price information	<b>Single room</b>	<b>CHF 145</b> breakfast included	
	<b>Double room</b>	<b>CHF 185</b> breakfast included	

I/We would like to book	<input type="checkbox"/> ..... single room(s)	Arrival date:	Arrival time:
		Departure date:	
	<input type="checkbox"/> ..... double room(s)	Arrival date:	Arrival time:
		Departure date:	

Name and address			
	Family name	Personal name	Company / Institution
	Family name	Personal name	Company / Institution
	Phone:	Fax:	Email:
Special requests	<input type="checkbox"/> smoking	<input type="checkbox"/> non-smoking	
	<input type="checkbox"/> other (specify):		

Method of Payment	<b>Your reservation can only be processed when credit card details are given. Payment is due upon departure.</b>	Credit card:	Credit card number:
		_____	_____
		Credit card holder:	Expiration date:
		_____	_____
Changes in reservation	All changes/cancellations must be made in writing		

_____	_____	_____
Date	Stamp	Signature