

Application

Please Fill the Hotels Form

First Name:

Family Name:

Profession / Title:

Affiliation:

Mailing Address:

City:

Country:

Residence Phone:

Clinic Phone:

Fax:

Mobile:

Email:

**Accompanying
Persons:**

Mr. Mrs.

Mr. Mrs.

Date Of Arrival:

Carrier:

Flight No.:

Date Of Departure:

Carrier:

Flight No.:

Transfer:

	1 pax	2 pax	3 pax	4/6 pax	7/9 pax	10/14 pax
Transfer by Mini Bus						
Transfer from Cairo Airport to Hotel in Down Town	30	17	13	10	9.5	8.5
Transfer by Limousine						
Transfer from Cairo Airport to Hotel in Down Town	40	21	16	----	----	----

Booked Hotel :

Hotel	Category	Before 31 May 2005		After 31 May 2005	
		Single	Double	Single	Double
Grand Hyatt (Main Venue)	5 Stars	165	185	180	200
Cairo Sheraton	5 Stars	165	165	180	180
El Gezira Sheraton	5 Stars	165	165	180	180
Pyramisa	4 Stars	125	125	140	140
Shephard	4 Stars	125	125	140	140
Al Nabila	4 Stars	70	80	80	90
Pharoas	3 Stars	50	60	60	70
Cleopatra	2 Stars	50	60	60	70

* Above rates are inclusive of service charge, governmental taxes & buffet breakfast.

Check in :

Check out :

Secondary Stay :

Check in :

Check out :

No. of nights :

I enclose with this form :

Photo copy of Bank transfer

in the amount of