

Hotel Reservation Form



65th General Assembly

Inter American Press Association

Hotel Hilton Buenos Aires

Buenos Aires, Argentina

November 6 - 10, 2009

(Publication or Company Name) _____

Name _____ Position _____

Name of spouse (if accompanying) _____

Business address _____ City _____

Country _____ Zip Code _____

Telephone _____ Fax _____ e-mail _____

Please send this hotel reservation request directly to hotel. A one-night deposit is required. Rooms will be reserved on strictly a first come, first served basis.

In case of cancellations after October 31, the hotel will charge the full value of your cancelled reservation.

NO RESERVATIONS GUARANTEED AFTER SEPTEMBER 21, 2009
The price includes breakfast

Reservation should be sent to:

Hotel Hilton Buenos Aires

Group Reservations

Macacha Guemes 351,

Buenos Aires, Argentina C1106BKG

Attention:

Julieta Vigliola

email: julieta.vigliola@hilton.com

Phone: 0054-11-4891-0038

Juan Pablo Galardi –

email: juanpablo.galardi@hilton.com

Phone: 0054-11-4891-0043

Fax: 0054-11-4891-0001



Deluxe - Single/Double	US \$ 266.00 / US \$ 276.00
Deluxe twin - Single/Double	US \$ 266.00 / US \$ 276.00
Executive - Single/Double	US \$ 315.00 / US \$ 325.00
Junior Suite - Single/Double	US \$ 589.00 / US \$ 599.00
Executive Suite - Single/Double	US \$ 789.00 / US \$ 799.00
Executive Corner Suite - Single/Double	US \$ 949.00 / US \$ 959.00

Total US\$ _____

21 % VAT is not included in the price.

(Note: Rooms will be reserved on strictly a first come, first served basis)

ARRIVAL DATE: _____ **DEPARTURE DATE:** _____

Payment may be made to the hotel by: ___ American Express, ___ MasterCard, ___ Visa or ___ Diners Club

To authorize hotel to charge your card, please fill in and sign below.

Credit card number _____ Security Code _____ Expiration date _____

Address of the card holder _____

Name on card _____ Signature _____