



Holiday Inn
Porto Gaia

RESERVATION NR:



2019 AES Conference
Audio Forensics

NAME: _____

ID OR PASSPORT NUMBER: _____

EXPIRY DATE: __/__/__

CITY: _____

COUNTRY: _____

DATE OF BIRTH: __/__/__

CREDIT CARD NR: _____

EXPIRATION DATE:

| CHECK-IN | CHECK-OUT |
|----------|-----------|
| | |

| SUPERIOR ROOM | | |
|---------------|----------|----------|
| | SINGLE | DOUBLE |
| N. ROOMS | | |
| PRICE | € 120,00 | € 130,00 |

EMAIL: _____

TELEPHONE NUMBER: _____

RESERVATION CONTACTS:

Marta Veloso/ Filipa Ramos +351 223747500

reservas@hiportogaia.com

REMARKS: _____

DATE: _____