



Please return to the hotel this form fully complete by e-mail (info@grandhotelsalerno.it).

The confirmation is subject to hotel availability.

Convention room rate available from 01/10/2025 to 07/10/2025

Name _____ Surname _____
Address _____ City _____ State _____ Postal Code _____
e-mail _____ Tel _____
Check in _____ Check out _____

Number of rooms	Room Type	Special rate valid for the conference	No. of nights	Total Amount
	Standard: Single	100,00 + 4,00 City Tax		
	Standard: <input type="checkbox"/> Twin <input type="checkbox"/> Double	130,00 + 8,00 City Tax		
	Superior: Single Sea View	120,00 + 4,00 City Tax		
	Superior Sea View: <input type="checkbox"/> Twin <input type="checkbox"/> Double	150,00 + 8,00 City Tax		
	Triple Sea View	198,00 + 12,00 City Tax		
	Deluxe Sea View: Singola	140,00 + 4,00 City Tax		
	Deluxe Sea View: <input type="checkbox"/> Twin <input type="checkbox"/> Double	170,00 + 8,00 City Tax		
	Quadruple two bathrooms Sea View	240,00 + 16,00 City Tax		
Note:				

Rates per room, per night, VAT 10% and Buffet Breakfast included

Standard (not sea view - Rear or inside of the building, view of the station / parking / interior of the city. Soundproofed).

Superior sea view, Deluxe sea view

Check in from 04.00 pm, Check out until 10.00 am

The above mentioned rates not included the city taxes: € 3,00 per person/night (from 1th February to 30th September) or € 4,00 per person/night (from 1th October to 31th January). This Tax not apply to children under 12 years.

The booking should be completed within 31/08/2025, after this date the above-mentioned rates cannot be guaranteed.

The reservation is CONFIRMED and the credit card will be charged 30 days before check in date.

Cancellation policy:

- cancellation received within 31/08/2025: no charge
- cancellation received from 01/09/2025 or in case of no-show: 100% of the booking will be charged.

Payment method: The credit card will be registered for booking guaranty and **charged on 01/09/2025 in full settlement of this booking**

☐ Visa ☐ MasterCard

Card Holder's Name: _____

Credit Card Number: _____

Expiration Date: _____ Card holder Signature: _____

I authorize the Hotel to deduct from the credit card indicated total amount

I, the undersigned _____ born in _____ on _____

The payment by bank transfer is available on request.

receipt, pursuant to art. 13 of the EU Regulation 2016/679, the information and note that in Italy the regulatory framework for the protection of personal data is governed by the European Privacy Regulation and by the Privacy Code amended by Legislative Decree 101/2018 issued on 10 August 2018 and entered into force on 19 September 2018, I consent to the use of my data by the Grand Hotel Salerno structure thus allowing the processing of "common and sensitive" personal data (Name, Surname, ID number or equivalent document, e-mail address, credit card number.), according to the methods and within the limits of the information.

In relation to the processing of my data as expressed above:

☐ I agree

☐ I do not agree

Place and date _____ Signature _____



FOR INVOICE

Business name _____

Address: _____

CAP-: _____ **City:** _____

Vat _____ **email** _____

TEL _____ **FAX** _____

PRIVACY INFORMATION

I, the undersigned _____ born in _____
on _____

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Place and date _____

Signature _____