3rd COST-G6 Conference on Digital Audio Effects
(DAFx-00)
Verona (Italy), December 7-9, 2000
HOTEL ACCOMMODATION FORM

Family name: .... First name: ....

Hotel category	**single room**(in EURO)	**double room**(in EURO)	**double as single room**(in EURO)
****	90	140	116
***	80	120	95

I wish to reserve:

n. .... room/s	single
n. .... room/s	double as single
n. .... room/s	double with...
in hotel category:	****
	***

Arrival date: .... Departure date: ....

SUMMARY OF PAYMENTS(in EURO)	
Registration fee	....
Student fee	....
Hotel deposit	....
Booking fee	....
TOTAL AMOUNT	....

I choose to pay by:(Please, mark your choice)

- non-transferable bank cheque headed to COGEST M. and C.
- Money order in favour of COGEST M. and C. on the current account n. 3244/1, CARIPLO BANK, address: Corso Porta Palio, Verona (Italy), ABI code: 6070, CAB code: 11700, specifying the name of the sender. *I enclose copy of the bank accountant showing the effected transaction.*
- Credit card (Mastercard, Visa, Cartasì, Eurocard):
  Printed name as it appears on the card: ....
  Birth date: .... Card number ....
  Expiry date: .... Signature ....

To be sent to: COGEST M. and C.
Vicolo San Silvestro 6 fax: +39 045 597265
37122 Verona (Italy) e-mail: cogest@tin.it

Date: .... Signature: ....