



# 9<sup>th</sup> ESPE ANNUAL CONGRESS

## TRANSFER FORMAT



### RESERVATION DETAILS

Name | \_\_\_\_\_

Surname | \_\_\_\_\_

N° guest | \_\_\_\_\_

#### ARRIVAL

Date | \_\_\_\_\_ Time | \_\_\_\_\_

Flight | \_\_\_\_\_ Airport | \_\_\_\_\_

#### DEPARTURE

Date | \_\_\_\_\_ Time | \_\_\_\_\_

Flight | \_\_\_\_\_ Airport | \_\_\_\_\_

Return this form completed to our reservation department Email: [segreteria@bibagroup.it](mailto:segreteria@bibagroup.it)

**The transfer will be guaranteed only if the minimum number of passengers is reached, otherwise we will not be able to confirm the service.**

You will receive the confirmation by **August 30, 2019**, after this date we kindly ask you to consider the service as unconfirmed.

The cost for the transfer (minivan 8 seats) is **€ 35.00 one way and € 35 return.**

ONEWAY

ROUNDTrip

#### INVOICE DETAILS

First and last name | \_\_\_\_\_

Address | \_\_\_\_\_

City, State ZIP | \_\_\_\_\_

VAT number | \_\_\_\_\_

Fiscal Code | \_\_\_\_\_

Univocal Code | \_\_\_\_\_

Email Address | \_\_\_\_\_

Please fill in your credit card details to confirm and guarantee your booking (In case of no show or late cancellation this credit card will be charged as per cancellation policy and fees mentioned above). Credit Card Type (please tick):

American Express

MasterCard

VISA

Card Holder | \_\_\_\_\_

Card Number | \_\_\_\_\_

CVC | \_\_\_\_\_ Valid until \_\_\_\_\_

I, (card holder's name) authorize "BIBA TOUR SRL" to charge the total costs of \_\_\_\_\_ to my credit card

Signature \_\_\_\_\_

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### TRANSFER

### CARD