

2010 ACCOMMODATION REQUEST FORM

Personal Information

Last Name

First Name

Male

Female

Nationality

Date of Birth (dd/mm/yy)

Place of Birth

Street and Number

City

State

Zip Code

Country

Telephone

Type of Accommodation

Please check your choice of accommodation

Hotel 1day (1 night) €50~

Residencial Hotel 1week(6 nights) €600~

Shared flat

*Non smoker only

Single room - Euro 700 per 4 weeks

Twin (or Triple) room - Euro 500 per 4 weeks

Duration

Single

Twin

1week (6 nights) €400 €300

2weeks (13 nights) €450 €380

3weeks (20 nights) €580 €450

4weeks (27 nights) €700 €500

2months - 8weeks (55 nights)

3months - 12weeks (83 nights)

4months - 16weeks (111 nights)

8months - 32weeks (223 nights)

Other _____ weeks

From

To

Total Euro

*Please state if you suffer from any illnesses, allergies, dietary problems and if you prefer not to have accommodation with pets.

Signature

Date



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