



HOLIDAY TOURS

The 3rd ACS/IEEE International Conference on Computer Systems and Applications (AICCSA'05)

3-6 January 2005

TRAVEL AND ACCOMMODATION BOOKING FORM

INSTRUCTIONS. PLEASE READ CAREFULLY.-Please complete this form, noting all requirements and return by facsimile or mail together with a photocopy of your Passport and a photocopy of your Credit Card (front & back) to.

Holiday Tours Agency: Mr. Yehia El-Decken
14 Alfy Street, Down Town, Cairo, Egypt. <http://www.holidaytours.org>
Email: yehia@egypt-holiday.com

TEL: + (202) 590 5289 FAX: + (202) 591 0499

Upon receipt of this form, **Holiday Tours will contact you** via email with a confirmation of your booking and a total amount payable

PASSENGER DETAILS

SURNAME _____ FIRST NAME _____ TITLE _____ CO. NAME _____

SURNAME _____ FIRST NAME _____ TITLE _____ CO. NAME _____

SURNAME _____ FIRST NAME _____ TITLE _____ CO. NAME _____

SURNAME _____ FIRST NAME _____ TITLE _____ CO. NAME _____

Address: _____ Town/City _____ Postcode _____

Telephone: (BUS) _____ (H) _____ (Cel) _____ (FAX) _____

Email (required to receive your confirmation): _____

ACCOMMODATION REQUEST

IMPORTANT NOTE :

To secure a reservation a credit card must be advised.

Payment should be done through: Western Union Quick Pay, Credit Card, Bank Transfer, Cash

Please be advised that in the event of cancellation or no-show after the reservation has been confirmed a fee will be charged directly to the advised credit card as per the cancellation policy mentioned in this document.

Choose Hotel [Prices Valid from Jan 3rd till Jan 10th 2005]

Semiramis Intercontinental Cairo	Single / Double Room	USD\$ 92 / 105	<input type="checkbox"/>
Helnan Shepherd Hotel	Single / Double Room	USD\$ 60 / 75	<input type="checkbox"/>
Safir Dokki Hotel	Single / Double Room	USD\$ 50 / 60	<input type="checkbox"/>

Above rates are Per Room Per Night for Standard Rooms Including: Bed & Buffet Breakfast, Taxes and Services

Check In Date _____ Check Out Date _____

Please note : if you would like to stay at an alternate property not listed above please let us know and we will provide you with rate and availability.

Four Nights Package at Semiramis Intercontinental Cairo from the 2nd to the 6th of Jan. 2005, including Bed & Buffet Breakfast, and excluding Taxes (15%) and Services (10%)

USD\$ 190 Per Person in a Double Room

USD\$ 325 Per Person in a Single Room

Please Check Here if you are a single traveller and interested in sharing a double room. (Depending on Availability).

Airport Pick-Up Request

IMPORTANT NOTICE:

Please note all transfers are from and to Cairo International Airport, please advise if you request a transfer from another airport.

Number of Passengers: _____

Date of Arrival: _____ Time: _____ Carrier [Airline]: _____ Flight Number: _____

Date of Departure _____ Time: _____ Carrier [Airline]: _____ Flight Number: _____

Type of Transfer (please tick)

Shuttle Van USD\$ 5 per person

Private Van or Lemo USD\$ 5 per person + USD\$ 10

Payment Options

Please Tick One

- I would like to pay via Credit Card information listed below.
 - I would like to use my Credit Card information listed below only to secure reservation and will pay by one of the following methods: (please tick one) Latest by the 21st of November 2004.
 - Bank Transfer (details on the following URL: http://www.egypt-holiday.com/payment/western_union.html)
 - Western Union Quick Pay (details on the following URL: http://www.egypt-holiday.com/payment/bank_transfer.html)
- and I understand that my Credit Card will be charged in case of cancellation according to the cancellation policy mentioned in this form.

Cancellation Policy

- 10% for Cancellations between the 21st of October and the 10th of November 2004.
- 20% for Cancellations between the 11th of November and the 10th of December 2004.
- 30% for Cancellations between the 11th of December and 21st of December 2004.
- 100% for Cancellations on and After the 22nd of December 2004.

CREDIT CARD AUTHORITY FOR TRANSFERS AND /OR ACCOMMODATION

I, _____ authorise Holiday Tour or its agents to charge the stated amount on my credit card as outlined below and enclose my signature for this authorisation. I also acknowledge that Holiday Tours or it's agents are not required to produce a copy of a signed and validated sales voucher to obtain payment:

- AMEX / VISA / MASTERCARD / JCB - Please Circle -

Credit Card No _____ Expiry Date _____

4 Digit Security No. (AMEX only) _____ Amount Authorised _____

Signature (exactly as on Credit Card): _____ Date: / /

Please Print this form, fill it and fax it to +(202) 591-0499 together with a photocopy of your passport, and your Credit Card (Front & Back)