



BOOKING FORM

Send the form to: hotels@danzainfiera.it

NAME AND SURNAME: _____

E-MAIL: _____ TEL.: _____

MOB.: _____ FAX: _____

INVOICING DETAILS

NAME AND SURNAME/COMPANY NAME: _____

TAX CODE (if applicable): _____ VAT CODE (if applicable): _____

FULL ADDRESS: _____

Arrival date: ____ / ____ / ____

Departure date: ____ / ____ / ____

FAIR DATE ENTRANCE

FRIDAY

SATURDAY

SUNDAY

CLASSIC	URBAN	COUNTRY & CENA	POP & CENA
SINGLE _____	SINGLE _____	SINGLE _____	SINGLE _____
DOUBLE _____	DOUBLE _____	DOUBLE _____	DOUBLE _____
TRIPLE _____	TRIPLE _____	TRIPLE _____	TRIPLE _____
Total No. people: _____	Total No. people: _____	Total No. people: _____	Total No. people: _____

Bank Wire Transfer

RECIPIENT:

Intertravel Co. s.r.l.

Credem ag.2

Piazza Goldoni 1 angolo Lungarno A. Vespucci 2 - Firenze

IBAN : IT26H0303202800010000232817

SWIFT : BACRIT21315

Description: "PACCHETTO DANZA IN FIERA2022"
please also add your full name

Credit Card

VISA / MASTERCARD / AMERICAN EXPRESS



PLEASE CHECK THE BOX
TO PAY BY CREDIT CARD

For credit card payments we will send
a secure link with the amount due.

ONCE THE BALANCE IS RECEIVED
WE WILL CONFIRM THE BOOKING.

Payment terms: 30% deposit upon confirmation, balance due 20 days before arrival