

**13th International Conference on Cryptology and Network Security**  
**22 – 24 October 2014, Crete, Greece**

**cans14**

Oct 2014, Heraklion, Crete

**ALDEMAR HOTELS**  
Hersonissos, Crete, Greece

**FAX or E-MAIL RESERVATION FORM**

**Please, fill in this form and send it directly to the Katrea Holidays at the fax number:  
+30-2810-330606.**

**Conference reservation dpt. E-mail: heraklion@katrea.gr Tel: +30-2810-255552**

**Contact Information:**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Affiliation: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip code: \_\_\_\_\_ Country: \_\_\_\_\_  
Email: \_\_\_\_\_ Home phone \_\_\_\_\_  
Work phone \_\_\_\_\_ Fax \_\_\_\_\_

**Booking Information:**

Booking period \_\_\_\_\_  
Arrival date: \_\_\_\_\_  
Departure date: \_\_\_\_\_  
Number of Nights: \_\_\_\_\_

**Please select the hotel of your choice**

***ALDEMAR Royal Mare Village Hotel\*\*\*\*\* – Conference Venue***

<u>Room Type</u>	<u>No of Rooms</u>	<u>Price (per room per day) in euros</u>
Single Bungalow	_____	112, 00 Euros Bed and Breakfast Basis
Double Bungalow	_____	135, 00 Euros Bed and Breakfast Basis
Triple Bungalow (with adult)	_____	195, 00 Euros Bed and Breakfast Basis
Triple Bungalow (with child 02 – 12 years)	_____	150, 00 Euros Bed and Breakfast Basis

**The dead line for reservations is until 31/08/2014. After 01/09/2014 the reservations will be "on request" basis.**

Number of Adults: \_\_\_\_\_ Number of children: \_\_\_\_\_

**Payment and Cancellation Policy:**

You will pay directly at the Katrea Holidays Ltd. Cancellation details as below

- For all cancellations made by the participants until **31.08.2014** there will be no cancellation fees
- For all cancellations of the reserved rooms made from **01.09.2014** until **19.10.2014** there will be a charge equal to 1 overnight, for the cancelled rooms.

For all cancellations made the arrival day or/and for **NON-SHOW** guests, there will be a charge equal to the total reserved overnights.

**Credit Card Information:**

In order to confirm your reservation, please provide your credit card information.

Card Type: \_\_\_\_\_ Name on Card: \_\_\_\_\_  
Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
Card validation code (CVC): \_\_\_\_\_  
Authorized Signature: \_\_\_\_\_

We should contact you on:

Phone (home) \_\_\_\_\_ Phone (work) \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Please indicate hours: \_\_\_\_\_

Additional Information & Wishes: \_\_\_\_\_