

Federation:	
Responsible person:	
Country:	
Town and address:	
Phone no:	
Email:	

**1. HOTEL 3 STARS \*\*\* SLOVENSKA PLAZA / SLAVIC BEACH**

Room Type	Arrival Date	Departure Date	Number of Rooms	Number Persons	Number Nights	Per Night	Total Price
Single						€	€
Double						€	€
Triple						€	€
						TOTAL	

**2. HOTEL 4 STARS \*\*\*\* ALEKSANDAR HOTEL / ALEXANDER HOTEL**

Room Type	Arrival Date	Departure Date	Number Rooms	Number Persons	Number Nights	Per Night	Total Price
Single						€	€
Double						€	€
Triple						€	€
						TOTAL	€

### 3. HOTEL 5 STARS \*\*\*\*\* HOTEL SPLENDID

Room Type	Arrival Date	Departure Date	Number of Rooms	Number Persons	Number Nights	Per Night	Total Price
Single						€	€
Double						€	€
Triple						€	€
						TOTAL	

---

signature and stamp

This reservation becomes valid ONLY when Organizer sends a Invoice for your booking!

Please return to [accommodation@team011.com](mailto:accommodation@team011.com)