



GLOBAL CARDIO ONCOLOGY SUMMIT 2023

The art of bringing all together

MADRID
SEPTEMBER, 27-29th



ACCOMMODATION FORM

Please fill in this form and send it to:
VIAJES EL CORTE INGLES, S.A. - Congresos Científico Médicos
C/ San Severo, 10 Planta Baja. 28042 (España)
Tel.: + 34 91 330 07 55 · e-mail: gcos2023@viajeseci.es

Last Name:
First Name: ID/Passport No.:
Address:
City: Zip Code: Country:
Phone: E-mail:

Hotels	Address	Single Room	Double Room
<input type="checkbox"/> 1. NH Zurbano	C/ Zurbano, 79-81, 28003 Madrid	185,90€	202,40€
<input type="checkbox"/> 2. AC Hotel Avenida de América	C/ Cartagena, 83-85, 28028 Madrid	132,00€	143,00€
<input type="checkbox"/> 3. Abba Madrid Hotel	Avenida de América, 32, 28028 Madrid	150,00€	160,00€
<input type="checkbox"/> 4. NeoMagna Hotel	C/ Don Ramón de la Cruz, 94, 28006 Madrid	131,00€	143,00€

Rates per room and night, breakfast and taxes included.

Please choose in preference order:

Hotel:
Reservation: Single Room Double Room Number of rooms:
Check in date:/...../..... (dd/mm/yy) Check out date:/...../..... (dd/mm/yy)
Number of nights: Total amount:

METHOD OF PAYMENT

BANK TRANSFER of charges to **Viajes El Corte Inglés, S.A.** (Please attached copy of payment)
Banco Bilbao Vizcaya Argentaria. **IBAN** ES97 0182 3999 3702 0066 4662 **SWIFT** BBVAESMMXXX

CREDIT CARD: **VISA** **MASTERCARD** **AMEX**

Credit card holder: ID / Passport:
Credit card number: Expiration date:/..... (mm/yy) C.V.V.:

I authorize the charge on my credit card of total amount.

"The personal details included in this document are of a confidential nature. In accordance with the Constitutional Law 15/1999 of 13 December, the holder of this data will be able to exercise his or her right of access, rectification and cancellation on written application to: Viajes El Corte Inglés, S.A.; Servicios Centrales-Dpto. de Organización y Métodos. Ada. De Cantabria, 51. 28042 Madrid"



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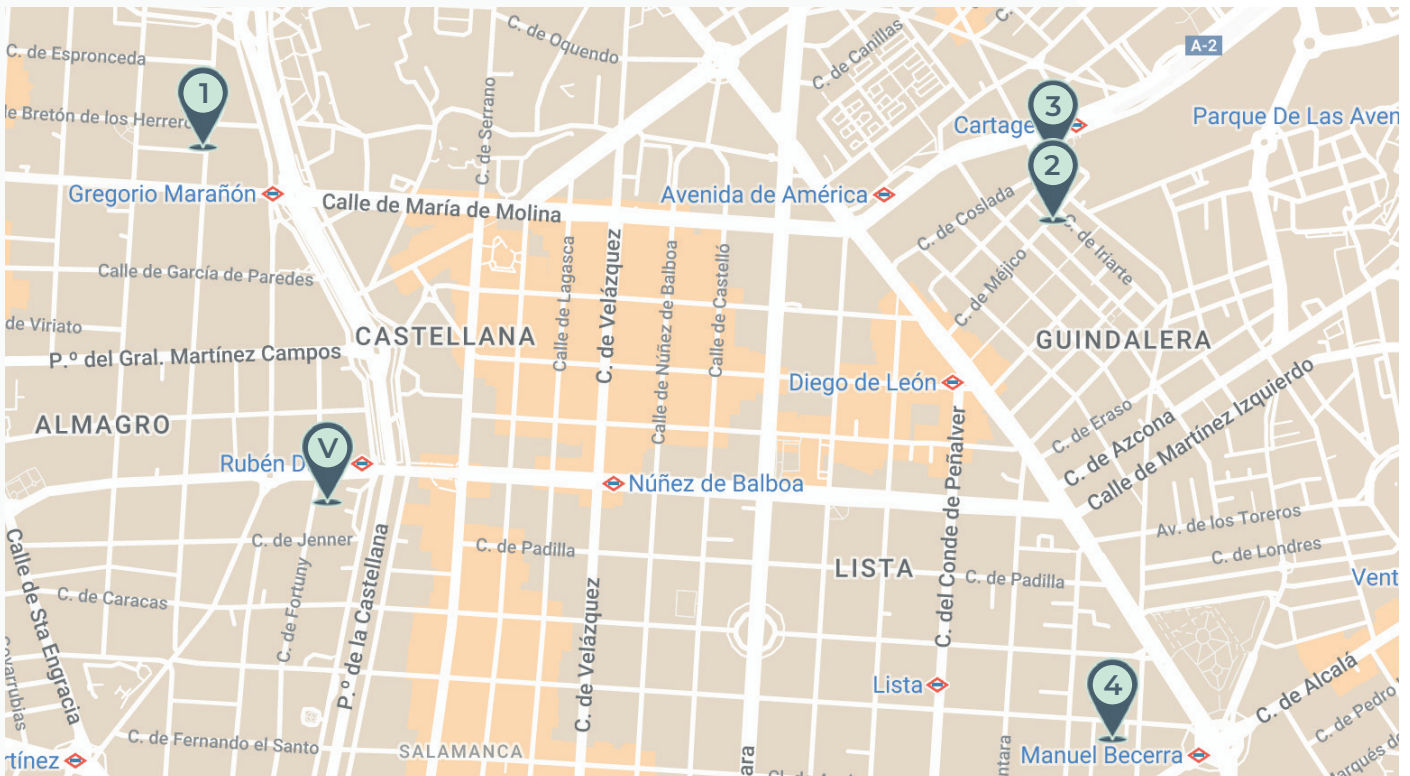
IMPORTANT NOTES: Payment and cancellation policy for individual and group bookings.

**Please contact to Technical Secretariat*

IN CASE YOU NEED AN INVOICE, PLEASE FILL IN:

Name and Last name or Company Name:.....
ID / VAT number:
Address:
City:..... Zip Code:..... Country:.....
Phone:E-mail:

VENUE: AUDITORIO DE MUTUA MADRILEÑA - P.º de Eduardo Dato, 20 28010 Madrid



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VIAJES El Corte Inglés
CONGRESOS CIENTÍFICO-MÉDICOS

TECHNICAL SECRETARIAT:
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