

## **REGISTRATION FORM – ITTONA 2024**

Registration form valid for one person and for a group/family (up to a maximum of 5 people).

Group/family means that all members arrive and depart on the same day, stay in the same hotel and participate in the same trips/initiatives. If members arrive/depart in different days and/or participate in different activities must fill in another registration form.

INFORMATION GROUP LEADER							
NAME & SURNAME							
ADDRESS  Indicate street, number, city, zip code, state, country							
MOBILE PHONE EMAIL							
TRENTINO CLUB MEMBERSHIP							
GROUP INFORMATION							
NUMBER OF GROUP/FAMILY MEMBERS INCLUDING GROUP LEADER							
Maximum 5 people  1. GROUP LEADER							
BIRTH DATE FOOD ALLERGY OR SPECIFIC NEEDS							
2. MEMBER 2							
NAME & SURNAME							
BIRTH DATE FOOD ALLERGY OR SPECIFIC NEEDS  MM/DD/YYYY							
3. MEMBER 3							
NAME & SURNAME							
BIRTH DATE FOOD ALLERGY OR SPECIFIC NEEDS							
4. MEMBER 4							
NAME & SURNAME							
BIRTH DATE FOOD ALLERGY OR SPECIFIC NEEDS							
5. MEMBER 5							
NAME & SURNAME							
BIRTH DATE FOOD ALLERGY OR SPECIFIC NEEDS							
MM/DD/YYYY							

SCHEDULED ARRIVAL  MM/DD/YYYY  ACCOMODATION  IHAVE ALREADY BOOKED ONE OF THE PARTNER HOTEL:  HOTEL CRISTINA HOTEL DENNY  HATEL CRISTINA HOTEL DENNY  IHAVE NOT BOOKED VET    WILL STAY WITH MY FRIENDS/FAMILY    IBOOKED ANOTHER ACCOMODATION (B&B APARTMENT)  Please indicate name and place of the accomodation  CONVENTION ITTONA  All the group/family members must choose the same trip. Please choose 2 options between:  A) Storo e Valle del Chiese  B) Valled Non  C) City of Trento  D) Garda Lake  1°* CHOICE  ALTERNATIVE  CHOICE  ALTERNATIVE  CHOICE  ALTERNATIVE  AUIT TATE 400,00 USD within 1°! March:  adult rate 400,00 USD within 1°! March:  NUMBER OF ADULT  X USD = USD  Total amount USD  LATTACH COPY OF THE PAYMENT  REGISTRATION FORM AND COPY OF PAYMENT MUST BE SENT BY EMAIL TO: Info@trentininelmondo.it	TRAVEL INFORMATION							
ACCOMODATION  I HAVE ALREADY BOOKED ONE OF THE PARTNER HOTEL:    HOTEL EUROPEO	SCHEDULED ARRIVAL		AIRPORT					
ACCOMODATION  I HAVE ALREADY BOOKED ONE OF THE PARTNER HOTEL:    HOTEL EUROPEO		MM/DD/YYYY	L					
ACCOMODATION    HAVE ALREADY BOOKED ONE OF THE PARTNER HOTEL:   HOTEL EUROPEO   HOTEL FUNIVIE   OLYMPIC HOTEL   HOTEL CRISTINA   HOTEL DENNY   HAVE NOT BOOKED YET     WILL STAY WITH MY PRIENDS/FAMILY   IBOOKED ANOTHER ACCOMODATION (B&B APARTMENT)     Please indicate name and place of the accomodation  CONVENTION ITTONA  All the group/family members must choose the same trip. Please choose 2 options between:   A) Storo e Vaile del Chiese   Is Valle di Non   C) City of Trento   D) Garda Lake  1st CHOICE   If 1st choice is not available  COSTS OF CONVENTION   free up to 6 years old; 50% of adult rate from 7 to 16 years old; adult rate 350,00 USD within 1st March; adult rate 400,00 USD within 31st May  NUMBER OF ADULT   X   USD = USD   Total amount USD    I LATTACH COPY OF THE PAYMENT  REGISTRATION FORM AND COPY OF PAYMENT MUST BE SENT BY EMAIL TO: info@trentininelmondo.it	SCHEDULED DEPARTURE		AIRPORT					
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HOTEL EUROPEO	ACCOMODATION							
HOTEL CRISTINA	I HAVE ALREADY BOOKED ON	NE OF THE PARTNER I	HOTEL:					
I HAVE NOT BOOKED YET  I WILL STAY WITH MY FRIENDS/FAMILY  I BOOKED ANOTHER ACCOMODATION (B&B APARTMENT)  Please indicate name and place of the accomodation  CONVENTION ITTONA  All the group/family members must choose the same trip. Please choose 2 options between:  A) Storo e Valle del Chiese B) Valle di Non C) City of Trento D) Garda Lake  1° CHOICE  ALTERNATIVE  COSTS OF CONVENTION  free up to 6 years-old; 50% of adult rate from 7 to 16 years-old; adult rate 350,00 USD within 1° March; adult rate 400,00 USD within 31° May  NUMBER OF ADULT  X USD = USD  Total amount USD  IATTACH COPY OF THE PAYMENT  REGISTRATION FORM AND COPY OF PAYMENT MUST BE SENT BY EMAIL TO: info@trentininelmondo.it	HOTEL EUROPEO	EL EUROPEO HOTEL FUNIVIE OLYMPIC HOTEL						
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