

## HOTEL REGISTRATION FORM

Please ensure the Hotel Registration Form is emailed to:

**Hotel Jūrmala Spa**

Jomas Street 47/49

Jurmala, LV-2015, LATVIA

Tel.: +371 67784415

E-mail: [booking@hoteljurmala.com](mailto:booking@hoteljurmala.com)

In order to guarantee your reservation, you are required to fill in this Hotel Registration Form completely with your personal information, credit/bank card number, room preferences and special requests.

Please make sure to email this completed and signed Hotel Registration Form to our Reservations Department at [booking@hoteljurmala.com](mailto:booking@hoteljurmala.com) by end of working day 11.07.2025.

### 11th International Scientific Symposium "Economics, Business & Finance"

Reference Reservation Number: 833706

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Tel: \_\_\_\_\_ E-mail: \_\_\_\_\_

A discounted guest room rate has been negotiated for this event. Conference participants wishing to secure a reservation must contact the Reservation Department directly and refer to their reservation number and participation at **11th International Scientific Symposium "Economics, Business & Finance"**

**Room Rates Include:** Breakfast Buffet, 1 x saunas & pools centre Wellness Oasis visit per night, 1,5 h (Saturday – Sunday) or 2,5 h (from Monday – Friday) and TAX. For 2 or more night stay enjoy Wellness Oasis center UNLIMITED

**Comfort Single Room: 156 € / night**

**Comfort Double or Twin Room: 164 € / night (1 large bed or 2 separate beds)**

**Superior Single, Double or Twin Room with a Balcony: 167 € / night (1 large bed or 2 separate beds)**

**Premium Single, Double Room with a Balcony: 191 € / night (1 large bed or 2 separate beds)**

**Room Category:** \_\_\_\_\_ **Occupancy (Single, Double or Twin):** \_\_\_\_\_

**Arrival Date:** \_\_\_\_\_ **Departure Date:** \_\_\_\_\_

By signing this Hotel Registration Form, I fully accept and authorize Hotel Jūrmala SPA to charge my credit/bank card as per reservations policy and conditions indicated hereunder.

**Credit Card Type:** \_\_\_\_\_ **Number:** \_\_\_\_\_ **Expiring Date:** \_\_\_\_\_

**Cardholder's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**RESERVATIONS POLICY:** Please make sure to email this completed and signed Hotel Registration Form to our Reservations Department at [booking@hoteljurmala.com](mailto:booking@hoteljurmala.com) by end of working day 11.07.2025. After this date, reservations can only be confirmed based upon availability. The Reservations Department will confirm receipt and respond with a confirmation letter. If you do not receive a confirmation within 2 working days, please contact us by phone.

**WE LOOK FORWARD TO WELCOMING YOU TO HOTEL JŪRMALA SPA!**