



(stamp)

Date:

Reservation No.

BOOKING A ROOM/CONFERENCE ROOM IN UL TRAINING AND COFERENCE CENTRE

90-232 Lodz, Kopcińskiego 16/18

RESERVATIONS: (+48) 42 635 54 90, e-mail: cskul@uni.lodz.pl; www.csk.uni.lodz.pl

ORDERING PARTY: (company name/name and surname, address, phone number, fax)

.....

PAYER: (name/name and surname, address)

..... NIP (Tax identification number)

ACCOMMODATION

DURATION: from until – number of people

Room type: **apartment** x **single room** x **double room** x

double room for one person x

Other information (e.g. regarding children)

breakfast YES NO

In the case of group meetings the organiser may ask for a guest list before the accommodation.

CONFERENCE ROOMS

No. 1 (50 people) day time day time

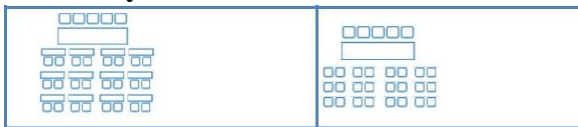
No. 2 (16 people) day time day time

No. 3 (16 people) day time day time

No. 4 (20 people) day time day time

Aula (160/max 200 people) day time day time

Room Layout: **Different layout** x



Training 160 people

Theatre 120 people

DINNING AREAS/ROOMS

No. 5 (40 people) day time day time

No. 6 (80 people) day time day time

OTHER SERVICES

FOOD AND MEALS (provided by an external company)

DINNER day x people, time

SUPPER day x people, time

BANQUETS day x people, time

COFFEE SERVICE day x people, time

UL TRANSPORT (FOR UL UNITS – if the cars are available)

Available: bus (19 places); microbus Mercedes-Benz Vito (8 places); microbus VW Transporter (8 places).
Contact regarding vehicles: dt@uni.lodz.pl, tel. (42) 635 53 84/ 635 53 81

PAYMENT FORM: cash, bank transfer, credit card

If you are paying with bank transfer the following documents are needed: National Court Register (pol. KRS), CEIDG – Central Registration and Information on Business, NIP number – Tax Identification Number

external settlement (regarding UL)

- | | |
|--------------------------|-------------------------------|
| 1. Account
(5XX)..... | 3. Source of funding
..... |
| 2. Project | 4. Cost Centre |
-

Additional information:

.....
Stamp and signature of the Ordering Party

.....
Signature of the Receiver

.....
Stamp and signature of the Payer

(You should fill in the Polish version of the form, English version is only provided for full understanding.)