

# **ACROSS STUDY TOUR ISTANBUL 17 - 19. APRIL 2024**

## BEST BRANDS AND MALLS IN A VIBRANT CITY

### **REGISTRATION**

### o I register for the ACROSS Study Tour Istanbul.

- I have read and accepted the disclaimer on the second page.
- I agree that my personal data will be stored and processed in accordance with German data protection regulations.
- The complete data protection declaration can be found at: https://www.pleus.de/datenschutzerklaerung.html
- Photos of the participants may be taken at the event. By registering, I agree that ACROSS/Rüdiger Pleus Consulting can take photos of me and use and distribute them as part of its public relations work.

The travel price is 990 € per person.

Included are a joint dinner including drinks, ground transportation according to the program, travel companionship by Rüdiger Pleus and Reinhard Winiwarter. This trip is organized and carried out by Rüdiger Pleus Consulting. All prices quoted are exclusive of VAT.

The tour will only take place with a minimum of 15 participants.

An invoice will be sent to you in good time before the event. The registration is binding as soon as it has been confirmed by ACROSS. In the event of cancellation, the full travel price will be charged.

Not included in the price and must be organized by each participant himself:

- Flights to and from Istanbul
- HOTEL: We arranged the Swissotel The Bosphorus Istanbul at a special rate; booking is mandatory at this hotel: https:// www.swissotelthebosphorus.com/For hotel booking please use the form below.

Rates 250,— € single / night breakfast & tax included

Please do not book your hotel and flight until you have received the relevant information and approval from us.

ACROSS may cancel the event at short notice for legitimate reasons. Should this be the case, payments made will be refunded. Further claims against ACROSS are excluded.



#### Disclaimer

On the occasion of the conduction of the Retail & Shopping Safari, the undersigned declares in favor of ACROSS & Rüdiger Pleus Consulting (hereinafter referred to as the beneficiary):

- 1. The undersigned (participant) takes part in the event at their own risk. He is solely responsible under civil and criminal law for all damage caused by him.
- 2. The undersigned hereby declares his consent that the beneficiaries accept no liability whatsoever for personal injury, property damage or financial loss, with the following restrictions: The exclusion of liability does not apply if the beneficiary is guilty of gross negligence or intent or in the event of a breach of essential contractual obligations, i.e. H. such obligations, the fulfillment of which is essential for the proper execution of the contract and on the observance of which the signatory may regularly rely. In these cases, however, liability is limited to compensation for typical damage that was foreseeable at the time the contract was concluded. Claims from the Product Liability Act remain unaffected.
- 3. Insofar as an exclusion of liability or a limitation of liability is agreed above, the undersigned agrees to this not only in his own name, but also in the name of his companions, helpers and all natural or legal persons to whom claims in the event of a damaging event can be transferred.
- 4. If the persons represented by the undersigned do not approve this, he indemnifies the beneficiaries from all claims that can be asserted against them in the absence of the above liability conditions.
- 5. The undersigned indemnifies the beneficiary to the full extent from all third-party claims if these claim against the beneficiary due to a damage event caused by the undersigned.

Name, Surname	
Company	
VAT Number	
Address	
Billing address, if derogate from above	
Phone, E-Mail	
Place, Date, Signature	

We look forward to receiving your registration by email: r.winiwarter@across-magazine.com



Fax: +90 212 326 8181

$$\label{eq:commutations} \begin{split} & Email: \underbrace{reservations.bosphorus@swissotel.com}_{CC: \underbrace{kazim.bacaksiz@swissotel.com}} \end{split}$$

## Registration Details

Title:	$\square$ Mr.	$\square$ Mrs.	$\square$ Ms.	
Family Name:				
First/Given Name:				
Business Address:				
Phone/Fax:571 3216912	Phone:	Fax:		
Email:				
Below mentioned rates ar	e per day/room is inclusiv	<u>e of breakfast, %</u>	10 VAT and %2 Acc	commodation Ta
Туре:	□ € 250.00 - Single Run	of The House		
Non-Smoking:	☐ Yes		□ No	
Special Requests:				
Date of Arrival:				
Date of Departure:				
Number of Nights				
Master Card ☐ Visa Card ☐  Name of Card Holder:  Credit Card Number:  Expiry Date:  By signing this from, I accept	American Express	of Payment  Diners Club □  utlined below *:	Euro card 🗌	
Date	Signature			

- Staying period: 16 April 20 April 2024
- Checking in 2 p.m. Checking out 12 p.m
- Breakfast will be served at Sabrosa Restaurant. Full buffet daily between 07.00-10.30 am.
- Each individual guest will cover their own Accommodation amounts and expences.
- Hotel will require credit card provison or cash deposit upon arrival.
- Reservations can only be confirmed and guaranteed if the credit card details are shared.
- Rates are availability guaranteed until 31.03.2024.
- The reservation can be canceled free of charge until **01.02.2024**.
- If there is any cancellation between **01.02.2024 01.03.2024**, 1st night will be charged as noshow.
- If there is any cancellation after **01.03.2024**, full nights will be charged as noshow.