

Quotation Request

STUDIOS AND SERVICES PROVIDED FOR SEMINARS

Date of the application: 02/02/2016

Organization/Institute

Contact/Manager:

Telephone:

Mail

Dates from… … … … … … … … … … … … . …. ….. /….. To … … … … … … … … … … … …. ….. /…..

|  |  |  |
| --- | --- | --- |
| **Services provided**  *(Please mention only the services wanted.)* | **Number**  **of People** | **Number**  **Of**  **Nights** |
| Studio Flats |  |  |
| Breakfasts |  |  |
| Lunch (Campus Restaurant ) |  |  |
| Linen (sheets, blankets, pillows, towels) |  |  |
| Meeting Room Rental |  |  |
| Kitchen Rental |  |  |

More details **……………………………………………………**

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Document to be returned:

By mail to **Residence@supagro.fr**

Or by post to Residence Student Montpellier SupAgro - 50 rue Croix de las Cazes -34000 Montpellier.