

Hotel Reservation Form for "IDS 2012"

26th August 2012 - 1st September 2012

Please send your Hotel Registration Form before the 26/06/12 to:

the direct fax number of the Reservations Department +32 9 223 78 21.

Or direct mail: <u>m.martens@nh-hotels.com</u>

Reservations received after 26/06/12 are subject to availability

➤ PERSONAL DETAILS (please use block capitals):		
Title Company Name Name Address Postal Code Country Tel Fax Email	: Miss. / Mrs. / Mr	
➤ ACCOMMODATION DETAILS:		
Arrival Date Departure Date Occupancy: Standard single roon	: Departure Time :	
☐ Standard double room € 124 per double room per night, breakfast buffet included		
City tax included.		
➤ GUARANTEE		
In order to guarantee the booking, valid credit card details need to be provided. The credit card will only be debited in case of no-show or failure to cancel the reservation in accordance with the cancellation policy as stipulated below		
Credit Card Type Credit Card Number	· · · · · · · · · · · · · · · · · · ·	
Expiration Date	:	
Signature Card Holder	· :	
> CANCELLATION POL	ICY	
The amount of compensation owed by the customer to the hotel as the result of cancellation is a percentage of the total amount of the cancelled service as specified in the pro forma invoice and is applied as follows:		
 Cancellation from the Cancellation from the Cancellation less tha 	r than the 30th day before arrival of the group: e 29th to the 15th day before arrival of the group: e 14th to the 8th day before arrival of the group: n 8 days before arrival of the group: now, the customer is liable to pay 100% of the total amount	0% 50% 75% 100% of the pro
DATE:	SIGNATURE:	