



HOTEL BOOKING FORM

DEADLINE: 29/02/2012

Thereafter room bookings are subject to availability

Our reference: +UNI0314

BEDFORD HOTEL & CONGRESS CENTRE
 RUE DU MIDI 135-137
 B-1000 BRUXELLES



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 TEL : + 32 (0)2 507 00 77
 FAX : + 32 (0)2 507 00 10

WWW.HOTELBEDFORD.BE

PARTICIPANT DETAILS

Organisation : _____ First Name : _____
 Last Name : _____ Email: _____

HOTEL

ARRIVAL date : . . / . . / 2012 DEPARTURE date : . . / . . / 2012

ROOM TYPE

All hotel rates are quoted in Euros, per night, per room, including American buffet breakfast and taxes.

SINGLE			DOUBLE		
o	137,50	STANDARD	o	152,50	STANDARD

CREDIT CARD (acts as a guarantee of your reservation and also constitutes acceptance of the terms and conditions)

Card number : _____ Owner's Name: _____
 Expiry date : _____ C.V.C. CODE: _ _ _

TERMS AND CONDITIONS

- * To ensure that a room has been reserved, all information in the booking form must be complete, and the form must be duly signed and returned to the hotel.
- * Kindly note that the check-in time is at 1400hrs and the check-out time is at 1200hrs. For arrival in the early morning, you are advised to book an extra room night.
- * Within five working days from the receipt of the signed hotel booking form, an acknowledgement note will be issued to you via email or fax.
- * Cancellations and changes of the hotel reservations have to be made in writing. The reservation can be cancelled free of charge up to 48 hours prior the arrival date.
- * Please note that the hotel is entitled to charge 100% of the total amount of the hotel reservation in case of late cancellation and in case of no-show.
- * Should a guest depart before the final date of his/her reservation, the hotel is entitled to charge the guest for the whole period of the initial reservation.

SIGNATURE: _____

DATE: . . / . . / 2012