

HOTEL BOOKING FORM
 EUROMINES
 20TH UNTIL 21ST APRIL 2016

Name:	First Name
Telephone:	Fax:
Address:	City:
Zip Code	Country:
Email:	AClub Number

Arrival date: /04/2016 Departure date: /04/2016 Number of nights:

Please fill in this form in capital letter and fax or email it back to the hotel no later than Wednesday, March 9TH 2016 (Beyond this date the room allotment will be released and the preferred rate will not be granted).

Novotel Luxembourg Kirchberg 4* (Ref:)

6 Rue du Fort Niedergrünwald – L-2015 Luxembourg – www.novotel.com
 Contact: Mr. SANTIAGO Jerry - Email: h1930-re@accor.com
 Fax: +352 43 91 95 - Tel.: +352 42 98 48



- Single Novation room at daily rate of 215.-€ including buffet breakfast
- Double Novation room at daily rate of 235.-€ including buffet breakfast

*Triple rooms will not have 3 separated beds

Please fill in below your credit card details which are mandatory to process your reservation:

- Credit card details: _____ Expiration date: _____
- Holder's name: _____
- Visa Eurocard/Mastercard American Express Diners

Cancellation and modification policy: Your reservation may be cancelled or modified with no charge until 4pm (hotel local time) 7 days prior the arrival date. Any modification made within 7 days of the arrival date will be charged of 100% room rate and room nights. Any cancellation made within 7 days prior arrival or non-arrival, the full stay will be charged.

Payment policy: Payment will be done at check-in or check-out time.

Herewith I agree with all rates and sales conditions related to this booking

Date:

Signature: