

**ROOM RESERVATION FORM**

To be sent to the following email [julie.leleu@sofitel.com](mailto:julie.leleu@sofitel.com)

Attn: Individual Reservations

Tel: +32 2 235 51 15

Tel: +32 2 235 51 01

**Brussels International Spine**

**Room Type:** *Classic Queen room for single use*

**Rate:** *175 EUR/Night*

Buffet breakfast is included.

City Tax of 9.00 EUR per room per night is not included in the bedroom rate.

**Arrival date:** ☐ 14/11/2013

☐ 16/11/2013

**Departure date:** ☐ 16/11/2013

☐ 17/11/2013

**FIRST NAME :** \_\_\_\_\_

**SURNAME:** : \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**COUNTRY :** \_\_\_\_\_

**Phone :** \_\_\_\_\_ **Fax :** \_\_\_\_\_

**Email :** \_\_\_\_\_

All accommodation requests must be submitted by **14/10/2013**

**Amount of one night will be charged in case of no-show  
or cancellation less than 1 month prior to arrival.**

**Card Holder:** \_\_\_\_\_

**Credit card number:** \_\_\_\_\_

**Expiry date:** \_\_\_\_\_

**Signature for approval on the conditions & authorization to debit the card:**

**Date :** \_\_\_\_\_

***Booking is according to availability –  
No booking can be accepted without credit card details &  
authorization to debit the card***