



HOTEL BOOKING FORM
LERIAS WEDDING
3RD UNTIL 5TH AUGUST 2018

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

Arrival date: /08/2018

Departure date: /08/2018

Number of nights:

Please fill in this form in capital letter and fax or email it back to the hotel no later than Friday, June 22TH 2018 (Beyond this date the room allotment will be released and the preferred rate will not be granted).

Novotel Luxembourg Centre 4* (Ref:WED080318)

35 Rue du Laboratoire – L-1911 Luxembourg – www.novotel.com

Contact: Group Contact - Email: h5556-am@accor.com

FAX: +352.26 48 02 24- Tel.: +352.24. 87.81

- ☐ Single Novation room at daily rate of 95.-€ including buffet breakfast
- ☐ Double Novation room at daily rate of 105.-€ including buffet breakfast

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: