

# Le MERIDIEN

BRUXELLES

## HOTEL RESERVATION FORM

**Carrefour de l'Europe 3**

**1000 Bruxelles**

**Telephone : 32 2 548 42 11**

**Fax : 32 2 548 40 80**

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**EPLAW**

*Le Méridien Bruxelles from 04/12/2008 until 05/12/2008*

**NAME :** \_\_\_\_\_  
**FIRST NAME :** \_\_\_\_\_  
**COMPANY :** \_\_\_\_\_  
**ADDRESS :** \_\_\_\_\_  
**CITY :** \_\_\_\_\_ **POSTAL CODE :** \_\_\_\_\_  
**COUNTRY :** \_\_\_\_\_  
**TELEPHONE :** \_\_\_\_\_ **FAX :** \_\_\_\_\_

### **PLEASE INDICATE DATE OF ARRIVAL AND DEPARTURE**

<b>Arrival date:</b>		<b>Departure date :</b>	
<b><u>Room type</u></b>	<b><u>Number of nights</u></b>	<b><u>Daily Rate</u></b>	<b><u>Total amount</u></b>
Superior single		229,00€*	
Superior double		259,00€*	

\* These specially negotiated rates are **in clusive** of city tax, service charges and VAT.

\* Rates are also including breakfast and are subject to any official tax changes.

**In order to confirm the above reservation, I authorise the hotel to use the under mentioned credit-card number. In case of no show or cancellation made within 5 working days and my arrival, therefore from 30/11/2008, I do authorise the hotel to charge the credit card:**

**Credit Card**  *Amex*  *Visa*  *Diners*  *Eurocard - Mastercard*  
**(please select the appropriate) :**  
**Number :** \_\_\_\_\_  
**Exp:** \_\_\_\_\_  
**Issued to (name on card):** \_\_\_\_\_  
**Signature (on card):** \_\_\_\_\_

PLEASE NOTE THAT THE DEADLINE FOR ALL RESERVATIONS IS SET ON 07/11/2008 AND THAT THE GROUP ALLOCATION IS LIMITED.

AFTER THIS OPTION EXPIRY DATE AND THE ALLOCATION EXPIRY, RESERVATIONS AND TYPE OF ROOMS WILL ONLY BE CONFIRMED UPON AVAILABILITY.

**REMARKS**  
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