



**RESERVATION FORM**

TO: Reservations Department  
FAX: +32 2 416 33 55  
E-mail: [cpba.reservations@whgeu.com](mailto:cpba.reservations@whgeu.com)

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**This reservation form must be returned by 01<sup>st</sup> October 2009 at the latest in order to benefit from the preferential "Q9U" group rate.**

Name \_\_\_\_\_

Company \_\_\_\_\_

Telephone number \_\_\_\_\_

Fax number \_\_\_\_\_

E-mail address \_\_\_\_\_

Arrival Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Departure Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Reference Code **Q9U**

Preference  Smoking  Non Smoking

	<u><b>RATE</b></u>
Standard Room	199 EUR per night
Buffet Breakfast	Excluded, € 22 per person
<i>Rates include tax and service.</i>	

In order to benefit from the above preferential rate, all reservations should be guaranteed by:

Credit card number: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

Cancellation of guaranteed reservations can be made until 4 PM on day of arrival; this to avoid a first overnight charge.

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***FOR HOTEL USE ONLY***

Confirmation N°

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_