

HOTEL BOOKING FORM
TENNIS CLUB DE BONNEVOIE
26TH UNTIL 31ST DECEMBER 2018

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

Arrival date: 26/12/2018

Departure date: 31 /12/2018

Number of nights: 5

Please fill in this form in capital letter and fax or email it back to the hotel no later than Friday, December 21st 2018 (Beyond this date the room allotment will be released and the preferred rate will not be granted).

Novotel Luxembourg Centre 4* (Ref:)

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

Contact: Anne-Sophie Heim - Email: h5556-sb@accor.com

Tel.: +352.24. 87.81 - Fax: +352.24 87 85 55

- Single Novation room (double bed, single use) at daily rate of 85.-€ including buffet breakfast
- Double Novation room (double bed, double use) at daily rate of 95.-€ 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: In case of no-show, the hotel will charge the 1st night. Any modification of the stay must be communicated at the latest the day before the departure. Any cancellation on the day of departure will be subject to charge the following night.

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

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

Date:

Signature: