University of Luxembourg 919154

From the 16th to the 22nd September 2018

Name:		First name:	
Telephone:		Fax:	
Address:		City:	
Zip Code		Country:	
Email		A-Club member:	
Arrival date	Departure date:		Number of nights:

<u>Please fill in this form in capital letter and fax or email it back to the hotel no later than the 05/09/2018 (Beyond</u> this date the room allotment will be released and the preferred rate will not be granted however the hotel will make every attempt to offer these rates if there is still availability):

Ibis Esch Belval 3*				
12 Avenue du Rock'n Roll- L-4361 Esch/Alzette - www.ibis.com	IDIS			
Email: h7071@accor.com	HOTELS			
Fax: +352 26 17 31 01 - Tel.: +352 26 17 31				
☐ Single room at 92€ per night including buffet breakfast				
☐ Double room at 107€ per night including buffet breakfast				
Please fill in below your credit card details which are mandatory to process your reservation:				
Credit card details: Expiration da	ate:			
Holder's name:				

<u>Attention</u>: Your reservation may be cancelled or modified with no charge until 2 pm (hotel local time) 7 days prior the arrival date. Any modification made within 7 days of the arrival date will be charged on the credit card. Any cancellation made within 7 days prior arrival or non-arrival, the full stay will be charged on the credit card. Payment is on spot upon departure time.

American Express

☐ Diners

To be completed by the hotel for your confirmation:

🗌 Visa

 Reservation confirmation number:

 Agent name:

 Confirmation date:

Eurocard/Mastercard