

ROOM RESERVATION FORM

To be sent to the following email: H1071-RE@sofitel.com

Tel: +32 2 549 61 63

OECI – Ref. 52940674

Room type:

Classic

Rate:

- 195.00 EUR/night** - Single occupancy
 215.00 EUR/night - Double occupancy

Arrival date:

14/06/16

Check-in time: from 3pm






- 15/06/16**
 16/06/16

Departure date:

15/06/16

Check-out time: until 12pm

- 16/06/16**
 17/06/16

-  **Buffet breakfast is included**
-  **WIFI is offered**
-  **The city Tax of 8.00 EUR per room per night is not included in the bedroom rate**
-  **Supplement of 20.00 EUR for a double occupancy**
-  **Early Check-in & Late Check-out options : please contact us if you are interested**

FIRST NAME / SURNAME _____

ADDRESS _____

COUNTRY _____

PHONE _____ **EMAIL** _____

All accommodation requests must be submitted by the 13th May 2016.
The entire stay will be charged in case of no-show or cancellation after the 30th May 2016.

Card holder _____

Credit card number _____

Expiry date _____

Date :

Signature for approval on the conditions & authorization to debit the card:

Booking is according to availability.

No booking can be accepted without credit card details and authorization to debit the card.