

Tel:+32 (0) 9 222 24 24 Fax:+32 (0) 9 222 66 22 res@higentexpo,com www.holiday-inn.com/gentexpo

Room Reservati	on Form - PID18	3 - May 2018
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Please send your hotel reservation form before 1st April 2018 to: res@higentexpo.com or by fax to +32 9 222 66 22 All reservations after 1st April 2018 are subject to availability and may apply rate changes

Your contact details:(please fill out in capital letters)		
Your name:		
Street+Nbr:		
Zip code + City		
Country:		
Telephone + country code:		
Email:		
Group code:		
Room requirements:		
Arrival Date		
Departure Date		
Number of nights		
Room Rates: single 102 euro / double 102 euro As from 1st Jaunuary 2016 city tax: 3,00 per person per n All rates are per room per night, incl VAT, service and bre		e of city tax.)
Total Single rooms :		
Total Double rooms (1 double bed)		
Names per room (please fill out in capital letters)	1	
	2	
	. –	
	3	
	4	
	5	
	6	
Payment Details:		
The invoice of rooms, meals and extra's is to be settled u	pon arrival. The hotel can ac	cept the following payment
guarantee:		
*Credit card guarantee : pls send us the card number and	d expiry date !	
Credit card number :		Expiry date
Or by		
*Prepayment by bank transfer to our account at BNP Pa Bank account n° 290-0389400-63 - IBAN BE40 2900 3894		
Without payment guarantee, the reservation will not be	finalised.	
Cancellation and no-show policy: All cancellations within 7 days prior to arrival will be char All no-shows will be charged at 100%	ged at 50% of total amount	cancelled.
Additional remarks:	. Construction for a discrimination	
Your reservation is only valid after receiving a signed co		
We look forward to receiving your completed form by en For information about the hotel or its services, please vis		ntexpo or call on +32 9 220 24 24
Sign and return	1	Holiday Inn Gent Expo hotel stamp

Confirmed by: