



INDIVIDUAL RESERVATION FORM

CIECA – ID 98724

06/11/12 – 07/11/12

Contact Details

Name: _____
First Name: _____
Address: _____
Zip/City: _____
Country: _____
Tel: _____
Fax: _____
E-mail: _____

Arrival

Date: _____ Time: _____

Departure

Date: _____ Time: _____

Room type (Please circle the room type you wish to book)

Single room: 110 EUR including VAT, service charges and breakfast
Double room: 120 EUR including VAT and service charges and breakfast

Credit card details (Please note that this form is not accepted without a valid Credit Card)

Card Number: _____
Card Type: _____
Expiry Date: _____
Card Holder: _____

Please return by Fax: +32 16 61 67 00 or Email: info.leuven@rezidorparkinn.com.

Please kindly note that after the above date, rooms and the rate is subject to availability.

If you have any questions, please do not hesitate to contact us at +32 16 61 66 00

Please note that cancellations are accepted up to 3 days before the arrival date. After this date all cancellations will be charged.

Park Inn Leuven
Martelarenlaan 36
3010 Leuven
T: +32 (0)16 61 66 00 F: +32 (0)16 61 67 00

www.parkinn.com/hotel-leuven