

UNIVERSITY OF LUXEMBOURG
JURIX'17

From the 12th to the 16th December 2017

Please send this form by fax or e-mail before the 10th November 2017

Rates are valid on request and upon availability

Mr. Mrs. Name: _____ Surname: _____
Company: _____
Town-Country: _____ Address: _____
Phone Number: _____ Fax: _____ E-Mail Address: _____
Date & Place of Birth: _____ Nationality: _____
Passport number: _____
Date of Arrival: ____/ 12 /2017 Date of Departure: ____/ 12 /2017 Arrival Time: _____

Hotel Belle-Vue***

- 124 € in a standard single room
 144 € in a standard double room
- Parking 25 € for the hotels Belle-Vue

All above mentioned net rates are per night and per room, breakfast buffet, service and all applicable taxes included.

Credit Card: MasterCard Visa American Express Diners Club
Card Number: _____ Expiration Date: ____ / _____
Security Code: _____ Card Owner: _____

Reservation Conditions: Free cancellation/modification possible until the **04/12/2017**. In case of any cancellation/modification after the **04/12/2017** or in case of any no-show without cancellation, we will charge the entire stay. We do not accept cancellations by phone; please cancel your reservation by fax or e-mail. Your booking is only binding by indicating the number of your credit card and the expiration date with CVC code.

Date & Signature.....**Hotel Confirmation**