



HISTORIC HOTELS GHENT

HOTEL BOOKING FORM Date: **21/09/2017-23/09/2017**

Code: Ghent Russia Colloquium

Please use one booking form per room. Please note that bookings received after **21/08/2017** are subject to availability.

Tel.: +32 (0)9 225 00 00
Fax: +32 (0)9 234 38 52
Contact person: Ms. Carlotte da Silva
E-mail: reservations@historic-hotels-ghent.com

GUEST DETAILS (please use block capitals)

Sir / Madam / Miss

First name: _____

Name: _____

Address : _____

Country: _____

Tel: _____

E-mail : _____

Hotel Gravensteen***

Jan Breydelstraat 35 – 9000 Gent

- Standard single (1 person) at 95 EUR per night Standard double (2 persons) at 103 EUR per night
 Executive single (1 person) at 110 EUR per night Executive double (2 persons) at 118 EUR per night

Please mark the exact amount of guests in the room, all our rooms have either a twin or a double bed. The above rates include VAT and services + the use of internet. Breakfast is available at €17 per person. All rooms are non-smoking rooms.

Supplement City Tax: 3€ pp/pd

Arrival date : ____/____/2017

Time of arrival : _____

Departure date : ____/____/2017

Number of nights : _____

Special requirements : _____

Hotel de Flandre****

Poel 1 – 9000 Gent

- Standard single (1 person) at 109 EUR per night Standard double (2 persons) at 119 EUR per night
 Executive single (1 person) at 129 EUR per night Executive double (2 persons) at 139 EUR per night

Please mark the exact amount of guests in the room, all our rooms have either a twin or a double bed. The above rates include VAT and services + the use of internet. Breakfast is available at €21 per person. All rooms are non-smoking rooms.

Supplement City Tax: 3€ pp/pd

Arrival date : ____/____/2017

Time of arrival : _____

Departure date : ____/____/2017

Number of nights : _____

Special requirements : _____



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GUARANTEE / PAYMENT

In order to guarantee the booking, valid credit card details need to be provided. The credit card will only be debited in case of no-show or failure to cancel the reservation in accordance with the cancellation policy as stipulated below.

Credit card holder : _____

Credit card number : _____

Expiry date : _____

CVC code : _____

Signature card holder: _____

*Following credit cards are accepted : American Express / Eurocard-Mastercard / Visa
Bills must be settled before departure.*

CANCELLATION POLICY

Reservations can be cancelled free of charge until 2 weeks before the day of arrival. In case of cancellation after this date or in case of a no-show, the first night will be charged to the provided credit card. Cancellations are only accepted in writing (fax or email).

Date : _____

Signature : _____