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EWUB LUXEMBOURG TROPHY 2016 20th 21st 22nd May 2016 HOTEL BOOKING FORM

Please return this form <u>duly completed</u> latest by 25 th April 2016 .						
COUNTRY/CLUB		FAMIL	FAMILY/.CHRISTIAN NAME			
ADI	DRESS (<i>private</i>):					
ZIP CODE / CITY:		COUN	COUNTRY:			
TEL	<u>:</u>	FAX:				
EMAIL:		PASSPORT NUMBER:				
DATE AND PLACE OF BIRTH:		NATIONALITY:				
<u>Abo</u>	ve information given by you will ensure a quick a	nd efficien	t check-in	<u>!</u>		
	Standard Guestroom rate (1 person) per night	EUR	80,00		☐ Queen Bed	
	Standard Guestroom rate (2 persons)	EUR	90,00	☐ Twin Bed	☐ Queen Bed	
	Superior Guestroom rate (3 persons)	EUR	120,00	☐ Twin Bed	☐ Queen Bed	
	Deluxe Guestroom rate (4 persons) Number of Persons in the room:	EUR	150,00	☐ Twin Bed	☐ Queen Bed	
	rooms more than is going to be sup This reservation is subject o Dinner Menu 2 dishes at 15.00€ (Soup +Chef Number of Person for Dinner: Banquet at 20.00€ Number of Person for Dinner:	of availabili 's Dish)	ity within	group room block. 19.05.16 □ 20.05 22.05.16	.16 □ 21.05.16	
	Referring to above event, I would like to make following reservation at the DoubleTree by Hilton Luxembourg					
→ ARRIVAL ON:						
I gu (OB	ase note that official check-in time is as of 2:00 p.m. larantee my reservation with the following of LIGATORY) The booking will be confirmed by the confirmed	credit car	d details	or by sending a co	py of bank transfer	
Crec Crec		IC/EUROC		O DINERS OTHER Expiry date:		
For	cancellation until 1 st of April 2016; any cancellation occurring between 02 nd April and any cancellation occurring as from 2 nd May 2016: 1	1 st May 20 100% pena	16, the val lty	lue of the first night wil	ll be not reimbursed.	

Down payments: Thank you for transferring the required **pre-payment** to the following bank account:

IBAN: LU80 00 19 1100 3015 8000Account Holder: Albergo S.A.R.L

BIC: BCEELULL - Banque et Caisse d'Epargne de l'Etat

BIC Code:BCEELULL

Reference: Country+GRS2014