



INDIVIDUAL RESERVATION FORM

KUL TRP2021 Rooms – ID 210915KULV - 15/09/2021– 17/09/2021

THANK YOU FOR YOUR REQUEST.

AFTER VALIDATION, WE WILL SEND YOU A CONFIRMATION OF YOUR RESERVATION.

May we ask you to complete this form in capital letters:

Company:	Zip/City:
	Country:
First Name:	Tel:
Address:	E-mail:
Arrival Date:	Departure Date:

ROOM RATE PER NIGHT

Date:	Single		Double
15/09/	2021 125.00	EUR	135.00 EUR
16/09/	2021 109.00	EUR	119.00 EUR
17/09/	2021 89.00 E	UR	99.00 EUR

• Accommodation charge of 1.06 EUR per person per night is excluded.

• Prices include VAT, service charges and breakfast.

CREDIT CARD DETAILS (Please note that this reservation will not be created without a valid Credit Card)

Card Number: The hotel will contact you by telephone for the card number.

Hour of the phonecall: between 09h00 and 18h00 from Monday till Friday.

Card Type Expiry Date	Card Type:	Expiry Date:
-----------------------	------------	--------------

Name card holder: ______ May we ask you to send this form together with a copy of your identity card.

Please return by 15/08/2021 to Park Inn by Radisson Leuven: sales.leuven@parkinn.com

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



Please note that cancellations are accepted up to **5 days** before the arrival date. After this date all cancellations will be charged.

If you have any questions, please do not hesitate to contact us at +32 16 61 66 02.

Date:

Signature: _____

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

www.parkinn.com/hotel-leuven