



Hotel Husa President Park
Blvd. du Roi Albert II, 44,
1000 Brussels
Tel. +32 22032020

Hotel Booking Form
CCA "Cool Pharma"

Please fill in this form in capital letters and fax it to:
Hotel Husa President Park +32 22032440

First Name: _____ Phone No: _____
Last Name: _____ Fax No: _____
Job Title: _____ Company Name: _____
Address : _____ Zip Code: _____
_____ Email: _____
Country: _____

Arrival Date: _____ **Departure Date:** _____

- Standard Single Room : special rate : **180,-- EUR**
 Smoker Non-Smoker

Breakfast is included. Payment is per own account

To guarantee your reservation, please indicate your credit card details :

- Visa Eurocard / Mastercard

Card Number: _____

Holders Name: _____

Expiration Date: _____

Date : _____ Signature : _____

Attention: in case of a no-show the credit card will be debited the room charge's amount.

GENERAL TERMS & CONDITIONS

1. GUARANTEE

Any unconfirmed individual room reservation will be guaranteed till 04.00 pm on the arrival date. As from 04.00 pm the hotel will be entitled to reallocate the room. A written confirmation is requested in order to guarantee the room reservation for any arrival after 04.00 pm. The written confirmation has to mention that the room reservation is guaranteed by Credit Card. Without this guarantee the room reservation will not be guaranteed.

2. CANCELLATION

Any cancellation that is not communicated in writing two days before arrival will not be taken into account. In this case 100% of the amount of the first room night will be charged.