# RESERVATION FORM : European Multigrid Conference 9<sup>th</sup>-12<sup>th</sup> September 2014 Venue: The Leuven Institute for Ireland in Europe

Personal Informa	ation																
Name:																	
Last Name:																	
Address:																	
Addiess.																	
Post Code:																	
Telephone Number:								Fa	ıx:								
Email Address:																	
Arrival Date:																	
Arrival Time:																	
<b>Departure Date:</b>																	
No of Nights Sta	ying:																
Accommodation	Details (Pr	ices	per V	/AT i	nclus	sive -	- Bufj	fet b	reak	fast l	is inc	lude	d)				
_	_					_											
Room Type					B&B Rate						Nu	ımbe	er of	pers	ons/	roor	ns
Single Occupancy					€95												
(Single or Twin Room)					250												
Double Occupancy					€60 per person												
(Twin Room)					(€120 Room)												
Quadruple Occupancy					€47.5 per person												
(Duplex with 4 beds on 2		iev	eis)		(€190 Room)												
*Shared with:																	
1. First Name:					La	st Na	ame:										
2. First Name:					Last Name:												
3. First Name:					Last Name:												
Card details are		ord	er to	sec	cure	you	r bo	okin	g. Y	ou c	an p	ay f	or y	our	stay	at o	ur
Reception on arr																	
□Visa □ Master		/itch	/ M	aest	ro 🗆	<b>D</b> e	lta 🗆	So	lo								
Name of Card Ho	older:		ı	ı	1	1			ı	ı	ı			1	ı	ı	1
Card Number:	<i>,,</i>																
Card Start Date	. ,	M	M	Υ	Υ												
Card Expiry Date																	
Issue Number (if shown)																	
Security Code																	
Cancellation Policy: Please see document herewith attached																	
Cancellation Poli	Please see document herewith attached																
Signature: Date:																	

## **Cancellation policy - Individuals:**

### **Cancellation of the agreement and no-show:**

Whole or partial cancellation of the agreement by the customer must be done in writing. The date on which the Institute is notified in writing of the cancellation by the customer shall be decisive for any compensation owed to the Institute due to the cancellation. The amount of compensation owed by the customer to the Institute as the result of cancellation is a percentage of the total amount of the cancelled service as specified in the quote confirmation. This amount is stipulated as follow:

#### **Accommodation:**

If a reservation for only hotel accommodation (with breakfast included) is made, for a one or more Individuals then the following applies to the Cancellation of this reservation.

- a. In case of Cancellation more than 1 month before the Commencement Date, the Customer is not obliged to pay any money to The Leuven Institute for Ireland in Europe.
- b. In case of Cancellation more than 5 days before the Commencement Date, the Customer is obliged to pay 30% of the Reservation Value to the The Leuven Institute for Ireland in Europe.
- c. In case of Cancellation more than 2 days before the Commencement Date, the Customer is obliged to pay 50% of the Reservation Value to the The Leuven Institute for Ireland in Europe.
- d. In case of Cancellation 48 hours or less before the Commencement Date, the Customer is obliged to pay 100% of the Reservation Value to the The Leuven Institute for Ireland in Europe."

==========