Accommodation Reservation Form for

“ECR” group in Vilnius (08-09/11/2012) at LE MERIDIEN Vilnius

##### Return per Fax to: 370 5 2739 730 or e-mail to reservations@lemeridienvilnius.com

*Title, Mr, Mrs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

#### First Name, Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Address:*

###### Street, City, Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*E-mail:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please reserve \_\_\_\_\_\_\_\_\_\_\_\_ room(s) as ticked below:***

***Arrival date \_\_\_\_\_\_\_\_\_\_\_\_\_ Flight Number\_\_\_\_\_\_\_\_\_\_ Arrival Time\_\_\_\_\_\_\_\_\_\_\_***

***Departure date \_\_\_\_\_\_\_\_\_\_\_\_ Flight Number\_\_\_\_\_\_\_\_\_\_ Departure Time\_\_\_\_\_\_\_\_***

***Smoking/non-smoking*** (please select)

|  |  |  |
| --- | --- | --- |
| ***Le Meridien*** | ***Room categories*** | ***Price***  |
|  | Superior Double/twin room for **single occupancy**  Non-smoking /  Smoking | € 70,00 |
|  | Superior Double/twin room for **double/twin occupancy**  Non-smoking /  Smoking | € 90,00 |
|  | Airport pick-up | € 29,00 |
|  | Airport drop-off | € 29,00 |

**Note**: the room rates are inclusive of full buffet breakfast, unlimited use of Health Club & Spa (20 meter indoor swimming pool, saunas, steam room & gym).

Above accommodation rates will be applied for a maximum of 2 days prior and post the event.

**Cancellation Policy:**

**Cancellation made later than 25th October, 2012: 100% non refundable charge of the cost of the stay**

To guarantee your booking by credit card please fill in the requested information below:

Credit card: Master/Euro Card/Visa / American Express/Dinners Club (please underline)

Credit card holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card no:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Expire date Today’s date

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | / |  |  |  |  |  |   |  |  |  |  |  | / | 2012 |

**In case your reservation is not guaranteed, please be informed that it will be held till the 25th October 2012.**

***I agree to the above Cancellation Policy***Name and address **of cardholder** if different from above:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature **of cardholder** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_