Biennale de Lyon 2009

Hotel Booking Form to be sent before August 15th at the latest to the hotel of your choice.

Date: ___ / ___ / ____

Hotel: _____

Last Name: _____
First Name: _____
Company: _____
Address: _____
Tel : _____
Fax : _____
E-mail : _____

Arrival date: ___|___ |____

Departure date: ___|___ |____

Number of nights: _____

☐ Single room(s) Rate B&B: _____

☐ Double room(s) Rate B&B: _____

To be confirmed, this reservation must be guaranteed by a bank credit card number.

I duly authorise you to charge from my credit bank card, the deposit as indicated on
as indicated on § "Booking" and any cancellation fees as indicated on § "Cancellation".

Credit card: ___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___

☐ Visa ☐ Eurocard ☐ Mastercard ☐ American Express ☐ Diners

Cryptogram (3 last numbers at the back of the card): ___|___|___
Expiration date: ___|___|___

Owner of the credit bank card: _____ Signature: _____

Booking:

No booking will be registered without a guarantee by Credit card. One night deposit by person will be requested for any booking. The hotel will confirm back the booking within a week. After the booking deadline above indicated, bookings will be registered according to availabilities.

Cancellation:

Please refer to the cancellation policy of each hotel.