

## PRENOTAZIONI ALBERGHIERE

**Scegliete uno dei 5 hôtels che seguono e prenotate direttamente il vostro soggiorno prima della data indicata, inviando la scheda corrispondente per fax**

### LISTA DEGLI HOTELS

**Participants should reserve rooms in one of the 5 hotels listed below as soon as possible before the date indicated, by fax. Reservation must be made directly with the hotel.**

#### **Hôtel Dorint Brussels (vicino al Parlement Européen)**

Boulevard Charlemagne 11-19 à BE-1000 Bruxelles

Tel. +32/2/231.09.09

Fax +32/2/230.33.71

Email: h5344-re@accor.com

Password "CECODHAS"

**Opzione fino al : 12 settembre**

#### **Hôtel Eurovillage (vicino al Parlement Européen)**

Boulevard Charlemagne 80 à BE-1000 Bruxelles

Tel. +32/2/235.17.13

Fax +32/2/230.56.35

Email: seminar@eurovillage.be

Password "CECODHAS 10-15/10"

**Opzione fino al : 12 settembre**

#### **Hôtel Léopold Brussels (vicino al Parlement Européen)**

Rue du Luxembourg 35 à BE – 1050 Bruxelles

Tel. +32/2/511.18.28

Fax +32/2/514.19.39

Email: cgrouwe@hotel-leopold.be

Password "CECODHAS 1591"

**Opzione fino al : 12 settembre**

#### **Hôtel Aris (vicino alla Grand Place de Bruxelles)**

Rue Marché aux Herbes 78 à 1000 Bruxelles à BE – 1000 Bruxelles

Tel. +32/2/514.43.00

Fax +39/2/514.01.19

Email: stephane.debruyne@arishotel.be

Password "CECODHAS"

**Opzione fino al : 12 settembre**

#### **Hôtel Le Châtelain (vicino all'Avenue Louise)**

Rue du Châtelain 17 à 1000 Bruxelles

Tel. +32/2/643.93.43

Fax +32/2/626.98.78

Email: vcambis@le-chatelain.net

Password "CECODHAS 101890"

**Opzione fino al : 12 settembre**

# CORPORATE RESERVATION FORM

## HOTEL DORINT BRUSSELS

BOULEVARD CHARLEMAGNE 19 À BE-1000 BRUXELLES

TEL. : +32/2/235.17.13- FAX : +32/2/230.56.35 - CONTACT : M. M. LAURENT

*Ref.: CECODHAS Booking Code CECO101005*

GUEST NAME : \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

EMAIL : \_\_\_\_\_

TEL. : \_\_\_\_\_ FAX : \_\_\_\_\_

ARRIVAL : \_\_\_\_\_ DEPARTURE : \_\_\_\_\_ NIGHTS : \_\_\_\_\_

- |  |    |         |
|--|----|---------|
| <input type="checkbox"/> SINGLE                | AT | 165 EUR |
| <input type="checkbox"/> DOUBLE                | AT | 189 EUR |
| <input type="checkbox"/> SINGLE EXECUTIVE ROOM | AT | 195 EUR |
| <input type="checkbox"/> DOUBLE EXECUTIVE ROOM | AT | 219 EUR |

\* EXECUTIVE ROOMS INCLUDING BATHROBE & SLIPPERS, FREE PARKING, WELCOME DRINK AT THE BAR, COFFEE & TEA MAKING FACILITIES AND CHOICE OF NEWSPAPERS.

THESE RATES INCLUDE SERVICE , VAT AND FULL BUFFET BREAKFAST

SMOKING  YES  NO SPECIALS : \_\_\_\_\_

### PAYMENT OR GUARANTEE

PLEASE NOTE ALL RESERVATIONS SHOULD BE GUARANTEED EITHER BY CREDIT CARD OR BY THE COMPANY.  
ANY NON GUARANTEED RESERVATIONS WILL BE AUTOMATICALLY RELEASED AT 6PM ON THE FDAY OF ARRIVAL.

CREDIT CARD  AMERICAN EXPRESS  DINERS  EUROCARD  VISA

CARD NUMBER : \_\_\_\_\_ EXPIRY DATE : \_\_\_\_\_

CARD HOLDER'S NAME : \_\_\_\_\_



### HOTEL CONFIRMATION

WE THANK YOU FOR YOUR REQUEST AND HAVE THE PLEASURE TO COFIRM YOUR RESERVATION :

CONFIRMATION NR : \_\_\_\_\_ RATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

# CORPORATE RESERVATION FORM

## HOTEL EUROVILLAGE

BOULEVARD CHARLEMAGNE 80 À BE-1000 BRUXELLES

TEL. : +32/2/235.17.13 - FAX : +32/2/230.56.35 - CONTACT : M. T. VAN WYNSBERGHE

*Ref.: CECODHAS 10-15/10*

GUEST NAME : \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

EMAIL : \_\_\_\_\_

TEL. : \_\_\_\_\_ FAX : \_\_\_\_\_

ARRIVAL : \_\_\_\_\_ DEPARTURE : \_\_\_\_\_ NIGHTS : \_\_\_\_\_

EXECUTIVE AT 147.00 EUR

VIP AT 167.00 EUR

THESE RATES INCLUDE SERVICE , VAT AND FULL BUFFET BREAKFAST

SMOKING  Yes  No SPECIALS : \_\_\_\_\_

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CREDIT CARD  AMERICAN EXPRESS  DINERS  EUROCARD  VISA

CARD NUMBER : \_\_\_\_\_ EXPIRY DATE : \_\_\_\_\_

CARD HOLDER'S NAME : \_\_\_\_\_



### HOTEL CONFIRMATION

WE THANK YOU FOR YOUR REQUEST AND HAVE THE PLEASURE TO COFIRM YOUR RESERVATION :

CONFIRMATION NR : \_\_\_\_\_ RATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

# CORPORATE RESERVATION FORM

## HOTEL LEOPOLD BRUSSELS

RUE DU LUXEMBOURG 35 À BE-1050 BRUXELLES

TEL. : +32/2/511.18.28 - FAX : +32/2/514.19.39 - CONTACT : MME C. GRUWE

*Réf.: CECODHAS 1591*

GUEST NAME : \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

EMAIL : \_\_\_\_\_

TEL. : \_\_\_\_\_ FAX : \_\_\_\_\_

ARRIVAL : \_\_\_\_\_ DEPARTURE : \_\_\_\_\_ NIGHTS : \_\_\_\_\_

JUNIOR SUITE AT 179.00 EUR

THESE RATES INCLUDE SERVICE , VAT AND FULL BUFFET BREAKFAST

SMOKING  YES  NO SPECIALS : \_\_\_\_\_

### PAYMENT OR GUARANTEE

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CREDIT CARD  AMERICAN EXPRESS  DINERS  EUROCARD  VISA

CARD NUMBER : \_\_\_\_\_ EXPIRY DATE : \_\_\_\_\_

CARD HOLDER'S NAME : \_\_\_\_\_



### HOTEL CONFIRMATION

WE THANK YOU FOR YOUR REQUEST AND HAVE THE PLEASURE TO COFIRM YOUR RESERVATION :

CONFIRMATION NR : \_\_\_\_\_ RATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

# CORPORATE RESERVATION FORM

## HOTEL ARIS

RUE MARCHÉ AUX HERBES 78 À BE-1000 BRUXELLES

TEL. : +32/2/511.18.25 - FAX : +32/2/514.19.39 - CONTACT : M. S. DEBRUYN

Réf. : CECODHAS

GUEST NAME : \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

EMAIL : \_\_\_\_\_

TEL. : \_\_\_\_\_ FAX : \_\_\_\_\_

ARRIVAL : \_\_\_\_\_ DEPARTURE : \_\_\_\_\_ NIGHTS : \_\_\_\_\_

SINGLE AT 120.00 EUR

DOUBLE AT 150.00 EUR

THESE RATES INCLUDE SERVICE , VAT AND FULL BUFFET BREAKFAST

SMOKING  Yes  No SPECIALS : \_\_\_\_\_

### PAYMENT OR GUARANTEE

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CREDIT CARD  AMERICAN EXPRESS  DINERS  EUROCARD  VISA

CARD NUMBER : \_\_\_\_\_ EXPIRY DATE : \_\_\_\_\_

CARD HOLDER'S NAME : \_\_\_\_\_



### HOTEL CONFIRMATION

WE THANK YOU FOR YOUR REQUEST AND HAVE THE PLEASURE TO COFIRM YOUR RESERVATION :

CONFIRMATION NR : \_\_\_\_\_ RATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

# CORPORATE RESERVATION FORM

## HOTEL LE CHATELAIN

RUE DU CHATELAIN 17 À BE-1000 BRUXELLES

TEL. : +32/2/646.93.77 - FAX : +32/2/646.00.88 - CONTACT : MME M. ABERGEL

Réf.: CECODHAS 101890

GUEST NAME : \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

EMAIL : \_\_\_\_\_

TEL. : \_\_\_\_\_ FAX : \_\_\_\_\_

ARRIVAL : \_\_\_\_\_ DEPARTURE : \_\_\_\_\_ NIGHTS : \_\_\_\_\_

SUPERIOR SINGLE AT 160.00 EUR

THESE RATES INCLUDE SERVICE , VAT AND FULL BUFFET BREAKFAST

SMOKING  YES  NO SPECIALS : \_\_\_\_\_

### PAYMENT OR GUARANTEE

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CREDIT CARD  AMERICAN EXPRESS  DINERS  EUROCARD  VISA

CARD NUMBER : \_\_\_\_\_ EXPIRY DATE : \_\_\_\_\_

CARD HOLDER'S NAME : \_\_\_\_\_



### HOTEL CONFIRMATION

WE THANK YOU FOR YOUR REQUEST AND HAVE THE PLEASURE TO COFIRM YOUR RESERVATION :

CONFIRMATION NR : \_\_\_\_\_ RATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_