



## Best Western Wavre Hotel

### RESERVATION FORM

“FORUM INTERENTREPRISES MAGHREB BELGIQUE  
POUR L’ INNOVATION ENTREPRENARIALE”

#### Guest details:

Name: Mr./Mrs. _____
First name: _____ Nationality: _____
Address: _____
City: _____
Tel.: ____/____/____ Fax: ____/____/____
E-mail address: _____
Passport number: _____

#### Best Western WAVRE Hotel

Department  
COMMERCIAL

#### Address

Rue du manil, 91

1300 WAVRE

BELGIQUE

Tel : 0032 10 24 33 34

Fax : 0032 10 24 36 80

[reservation@wavre-hotel.be](mailto:reservation@wavre-hotel.be)

[www.wavrehotel.be](http://www.wavrehotel.be)

I would like to make the following hotel reservation:

<b>Arrival date:</b> ____/____/ 2010 - <b>Departure date:</b> ____/____/ 2010
<u>Number of rooms:</u>
SINGLE room(s)      60 € per single room and per night
Hot breakfast buffet included

Pour garantir votre réservation, nous vous remercions de nous fournir :

<u>Card type:</u> Visa – American Express – Eurocard/Mastercard – Diners Club
<u>Credit card number:</u> _____ <u>Expiry date:</u> ____/____

Date,

Signature,

To reserve this form has to be send to **GROUP RESERVATIONS** by fax:  
+32 (0)10/24 36 80 or by e-mail: [reservation@wavre-hotel.be](mailto:reservation@wavre-hotel.be)

Every cancellation has to be done by fax till the day of arrival before 6pm;  
otherwise the first night will be charged on the credit card.