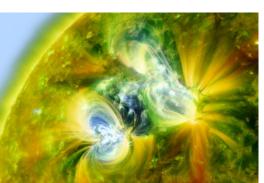


June 25 - 27, 2013, La Roche-en-Ardenne, Belgium



ROOM RESERVATION FORM SIXTH CORONAL LOOPS WORKSHOP

www.stce.be/coronalloops Deadline = May 10th

Deadine Way Iven			
NAME:			
FIRST NAME:			
ADDRESS:			
TEL:	FAX:		
EMAIL:	@		
CARD N°:			
EXPIRES: /			
CVC / CODE OR SECURITY / CODE:	(last 3 digits on reverse of card near signature or for AMEX: 4 digits in front of card)		
HOLDER: American Expre	ss Eurocard/Mastercard Vi	sa Other:	
	Credit Card Booking ONLY (no chequ All reservations are made on a first come fi		
Date of Arrival:	Date of Departure:	Number of Nights:	Single: Double:
/ 06 / 2013	/ 06 / 2013		
	ROOMS:		Euros:
Single			62,30
Double			94,60
All reservations are made on first come, fir To guarantee the reservation, I authorise the Reservations received beyond the deadline Cancellations received within 7 days prior	oom, per night, including breakfast, taxes and servist served basis. A valid credit card number with ex ne Floreal to debit my credit card with the charges will be subject to space and rate availability. To arrival will be charged one night's room rate. In ervation requests after the deadline will be subject to deadline.	piry date is required. for one roomnight. I case of NO SHOW, the hote	
DATE: / 2013 and	SIGNATURE:		
Floreal	Print and fax to: Floreal La Roche /Av. B-6980 La Roche-en-Ardenne Tel.: 00 32 / 84.21.94.57 Fax: 00 32 / 84.21.94.45 Contact: Christel	N° de la c N° de l'aj N° de rés	l'administration: chambre: cpartement: ervation: eption:
	Or print, fill in, scan and send by mail to:		

christel.bultot@florealgroup.be