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**Université de Luxembourg  
 Luxembourg Centre of Systems Biomedicine**

**3rd International Parkinson's Disease Symposium on Campus Belval**

From the 4<sup>th</sup> to the 8<sup>th</sup> of October 2016

Please send this form by fax or e-mail before the **15.09.2016**

Mr.       Mrs.

Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Company: \_\_\_\_\_

Town-Country: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Date & Place of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Passport number: \_\_\_\_\_

Date of Arrival: \_\_\_\_/10/2016    Date of Departure: \_\_\_\_/10/2016    Arrival Time: \_\_\_\_\_

**Hotel ACACIA**

65 € in a single standard room

95 € in a double standard room

**Taxe of staying 2.00€ / day / room**

**All above mentioned net rates are per night and per room, breakfast buffet, service.**

Credit Card:     MasterCard     Visa     American Express     Diners Club

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**Condition**

Free cancellation/modification possible until the **20.09.2016**. In case of any cancellation/modification after the **20.09.2016** or in case of any no-show without cancellation, we will charge the entire stay. We do not accept cancellations by phone; please cancel your reservation by fax or e-mail. Your booking is only binding by indicating the number of your credit card and the expiration date with CVC code.

**Date & Signature**.....

**Hotel Confirmation**