1		PLM	Europe – UG			
	+ 1 +				$12^{th} - 15^{th}$	
DISNE	MAND, RESORT PARIS		HOTEL RESERVATION FORM To be returned to :			
RUSINESS SOLUTIONS BUSINESS SOLUTIONS - ROOMS RESERVATIONS						
BP 112 - 77777 MARNE LA VALLÉE CEDEX 4 - FRANCE Tel : 33 - 1 60 45 73 99 - Fax : 33 - 1 60 45 73 98						
			nail : dlp.dbs.rooms.re	servation@disney.com	1	
				TER	MS & CONDITIONS	
To reserve your accommodation at Disneyland Resort Paris, please return this form duly completed by fax no later than						
September 15 th , 2008. After this date, your request will be subject to availability.						
You hereby expressly authorize Euro Disney to directly debit the total amount of the booking from your credit card, details of which must be completed hereunder.						
Please note that the debit of your credit card will occur 7 (seven) working days before your arrival date.						
Should such debit prove to be impossible for any reason whatsoever, Euro Disney may cancel the booking and shall inform you of such cancellation.						
In the event of no-show, partial or complete cancellation of the hotel booking within 7 (seven) working days of the date of arrival,						
you hereby expressly agree that any amount paid, limited to a total amount of 3 (three) hotel nights, be retained by Euro Disney as						
cancellation fee. The registration fee is not refundable.						
Cancellations must be made in writing at the fax number here above.						
LAST NAME :			FIRST NAME :			
COMPANY :		ADDRESS :				
POSTAL CODE :		CITY :	COU	NTRY:		
TELEPHONE :FAX :E-MAIL :						
Information necessary to follow up bookings. To be used by the Euro Disney Group Companies and its contracting parties. Right of access and amendment (L. 01/06/1978) Euro Disney Associés SCA Business Solutions Department.						
B.P. 112 - 77777 Marne La Vallée Cédex 4 - France.						
ARRIVAL DATE : NUMBER OF ADULT (S) :						
ARRIVAL DATE : NUMBER OF ADULT (S) : DEPARTURE DATE : NUMBER OF CHILDREN (3 to 11 years incl.) :						
DEFARTURE DATE: NUMBER OF CHILDREN (5 to 11 years met.).						
					LOCAL HOTEL	
	ROOM RATE (per room & per night)	NR OF NIGHTS	REGISTRATION FEE- per room reserved	TOTAL AMOUNT	OCCUPANCY TAX	
[]			1		(indicative amounts)	
NEW YORK	139 Euro		10 Euro		1.65 Euro	
NEWPORT BAY CLUB	139 Euro		10 Euro		1.10 Euro	
SEQUOIA LODGE	139 Euro		10 Euro		1.10 Euro	
NOTE : Accommodation for the night of October 11 th or the night of October 15 th is available in hotel New York only on a first						
come first serve basis. Booking extensions in the other hotels will be granted upon availability only. The room rates include VAT and continental breakfast (served in the restaurant of the hotel), exclude local hotel occupancy tax - per						
person and per night - which is to be paid directly at the hotel and may be subject to change without prior notice.						
Our rooms can accommodate from one to four persons; check-in time is after 3 pm, check-out before 11am - local time.						
[] Please tick if you n	eed more than 1(one)	room and fill in as n	nany forms as rooms	required.		
Nr of rooms : PAYMENT DETAILS						
Reservations will be processed and confirmed only if returned with a means of payment (credit card or cheque						
Important note: Card holder's signature and card digit security code are compulsory for any payment with a credit card. Should the form						
be returned by e-mail, it will need to be scanned with the cardholder's signature before sending.						
CREDIT CARD NR// EXP DATE/CORPORATE [] PERSONAL []						
CARD DIGIT SECURITY CODE (the last 3 figures printed on the back of the credit card within the space provided for the signature)						
CARD HOLDER'S NAME : CARD HOLDER'S SIGNATURE : Your confirmation number will be sent to you by mail or fay. Please make sure a confirmation number is obtained to validate your						
Your confirmation number will be sent to you by mail or fax. Please make sure a confirmation number is obtained to validate your hotel reservation.						