

# LX Hotel Booking Form

## Contact Information

**Member's Name:** \_\_\_\_\_

**Membership No.:**  (If known)

**Member's Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Post Code / ZIP** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

## Room Deposit Information

A non-returnable £20 deposit is required for each room booked on this form. The deposit can be paid either by a cheque (drawn on a UK bank account) made out to "LX2009" or by a charge to a valid credit card.

I enclose a deposit cheque for the sum of:  £

Please charge my credit card to the sum of:  £

**Credit Card No.:**

**Expiry Date:** \_\_\_\_\_ **Issue Number:**

**Name of Card Holder** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please note:** We will only use these credit card details to take the deposits indicated on this form and after use will securely store the form before shredding it after the con.

Please tick this box to confirm you understand the convention will not cover your hotel bill, and that you are responsible for settlement of your hotel bills at the convention. Room sharers are responsible for the splitting of the bill which will be booked in the members name above. No tick, no booking.

## Hotel Booking Information

Hotel bookings will be made according to preference and availability. Please number the convention hotels in your order of preference. If there are any hotels in which you do not wish to be booked, please number the option "No Booking" as your next preference after the last hotel into which you are prepared to be booked.

<b>Cedar Court Hotel</b>	<input type="text"/>	<b>Midland Hotel</b>	<input type="text"/>
<b>Campanile Hotel</b>	<input type="text"/>	<b>Hilton Hotel</b>	<input type="text"/>
<b>No Booking</b>	<input type="text"/>		

Please specify the number of each type of room required by entering the number of rooms in the box along side each room type.

<b>Family Room</b>	<input type="text"/>	<b>Twin Room</b>	<input type="text"/>
<b>Double Room</b>	<input type="text"/>	<b>Single Room</b>	<input type="text"/>
<b>Arrival Date:</b>	_____	<b>Number of Nights:</b>	<input type="text"/>

## Hotel Guests Information

### Names of adult/teenage (13 or over) guests

(Maximum of 2 per Family/Double/Twin room and 1 per Single room)

Age if < 17

(1)	_____	_____
(2)	_____	_____
(3)	_____	_____
(4)	_____	_____

### Number of child (under 13) guests

(Maximum of 2 in addition to adults in Family room)

### Special Requests (will be accommodated where possible)