

No. of Persons _____

| | Name | Date of Birth | Passport No. |
|---|------|---------------|--------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

Telephone _____ Nationality _____

Address _____

E-mail _____ I do not wish to receive marketing materials such as newsletters and promotions via email from Louis Hotels.

Terms of Stay Tour Operator _____
BB HB FB AI

Date of Arrival _____ Date of Departure _____ For official use only:
Room No. _____

Method of Payment Cash Credit Card Have you stayed with us before? Yes No

In which Louis Hotels have you stayed at before? _____

By submitting this form, you consent to the use of your "Personal Information" by Louis Hotels. Louis Hotels is committed to protect your privacy and your personal data. Our detailed Privacy Policy is available at www.louis-hotels.com and at the Front Desk of our Hotels. Please read carefully as this describes amongst others, why and how we collect your personal data and provides in detail all relevant information about your rights.

PUBLIC HEALTH HOTEL GUEST CONFIRMATION

To assist us in providing for the health and safety of guests and staff at this Hotel, we require you, in case any of the parties of the booking and/or person listed above has developed within the last 3 days any symptoms of diarrhea or vomiting or any other symptom of contagious or infectious illness, to report this at the Hotel Reception. The same should be reported during your stay to help prevent the spread of illness to other guest and staff.

According to the Terms and Conditions of your stay with Louis Hotels Group if any parties of the booking and/or any of the person listed above develop any symptom of contagious or infectious illness such parties should remain in the Hotel room, if required by Louis Hotels Group, for 48 hours and to see a doctor if required and/or be restricted from using certain hotel facilities until 48 hours after such symptoms have been resolved to help prevent the spread of illness to other guests.

Louis Hotels Group reserves the right to ask the guest to fill in a Guest Gastric Illness Questionnaire and undergo a medical examination by a doctor. Also, Louis Hotels Group may ask the guest to undergo any test, including providing faecal samples, to verify the illness and identify the pathogen which has caused illness.

In case the above are not followed this may cause serious public health implications for fellow guests, and may affect the ill guest's ability to prove in the future any possible gastric illness during his/her holiday.

Failure to comply with the above is in breach of the Law and may amount to a criminal offence.

Further Louis Hotels Group may be eligible to claim damages.

I confirm that I have read and understood this document and I have personally informed all parties of my booking of these requirements and agree for myself and on behalf of the parties of my booking to comply with the above and with any other related requirements by Louis Hotels Group.

Signature _____

Date _____