



HOTEL RESERVATION FORM

IFIP NETWORKING 2008 NANYANG TECHNOLOGICAL UNIVERSITY, SCHOOL OF COMPUTER ENGINEERING

4 – 10 MAY 2008

Hotel rooms are available to guests at conference rate for the abovementioned meeting only. Please fill in the hotel reservation form should you wish to make room reservation and fax or email directly on or before **15 April 2008** to:

Attention : Ms Serena Soh (Sales Manager)	Address : Grand Plaza Park Hotel City Hall
DID : 65 6432 5511	10 Coleman Street Singapore 179809
Fax : 65 6334 2962	Tel : 65 6336 3456
Email : serenash@chsg.gp.parkhotelgroup.com	Website : www.parkhotelgroup.com

Personal Particulars

Name (Prof. / Dr. / Mr. / Mrs / Ms) _____ Passport No. _____

Designation _____ Organisation _____

Address _____

Telephone _____ Fax _____ Email _____ (Compulsory)

Sharer Name _____ Passport No. _____

Accommodation Details

Arrival Date _____ Flight No. _____ Arrival Time _____

Departure Date _____ Flight No. _____ Departure Time _____

Room rate per night		Room Type (Pls tick)	
Single	Twin		
Deluxe	\$290++	\$310++	<input type="checkbox"/> Sgl <input type="checkbox"/> Twin
Breakfast at \$20++ / pax / night			<input type="checkbox"/> 1 pax <input type="checkbox"/> 2 pax

Above room rates are subject to 10% service charge and 7% GST

Number of Rooms : _____

Method of Payment : Guests are responsible for settling their own bills directly with the hotel upon check-out.

Credit Card to Guarantee : Amex / Visa / Mastercard / Diners / JCB (**Please select**)

Credit Card Number : _____ Exp. Date : _____

Signature : _____ 3 Digit Security No. : _____

No-Show / Cancellation

Any cancellations or amendments must be made before 4pm (local time) 1 day prior to the date of arrival. Otherwise a Cancellation fee/ No-show charge equivalent to the room rate for the first night will be levied. Standard check-in time is after 1400 hours and check-out time is at 1200 hours. Early check-in is subject to availability.