

ROOM RESERVATION FORM

Regional Runway Safety Seminar (Asia Pacific), 18-20 November 2013

(Department of Civil Aviation Malaysia)

Name :						
Nationality:						
Passport :						
Telephone:	Email :					
Date of Arrival:	Flt/ETA:					
Date of Departure	Flt/ETD:					
Room categories & rates for information only – Rates will be valid between 15 th November 2013 – 23 rd November 2013 - (3 Days Pre & Post Arrival)						
Deluxe Room inclusive o ☐MYR 370.00++ per room ☐MYR 410.00++ per room	per night for 1 person (Single occupancy)					
Deluxe Twin Tower Room inclusive of breakfast(s)						
□MYR 410.00++ per room per night for 1 person (Single occupancy) □MYR 450.00++ per room per night for 2 persons (Double occupancy)						
□NITK 430.00++ per room	per night for 2 persons (Double occupancy)					
Club Room inclusive of b	• •					
☐MYR 560.00++ per room ☐MYR 600.00++ per room						
□WTK 000.00++ per room	per night for 2 persons (Double occupancy)					
Deluxe Suite with Club Be						
☐MYR 720.00++ per room						
<i>⊔MYR 760.00</i> ++ per room	per night for 2 persons (Double occupancy)					

The above guest room rates are:

- Inclusive of daily buffet breakfast for 01 or 02 persons
- Non commissionable
- Extended to delegates for three(3) days prior and three(3) days after the event, subject to availability of guest rooms at the time of reservation
- In room broadband access chargeable at MYR45.00nett
- Rates offered are subject to 10% service charged and 6% government tax

Cancellation and Early Departure:-

13 days to 08 days prior to arrival

A cancellation fee equivalent to one (01) night of stay will be charged.

07 days or less prior to arrival

A cancellation fee equivalent to the entire length of stay will be charged.

Early Departure

In the event of unfulfilled rooms night (entire duration of stay) after confirmation of room block, an Early Departure fee of a half day room rate will be charged.

To guarantee the ro	om(s), details of my c	redit/charge card are	as follows:			
□ Visa	☐ Master	☐ Diners	☐ Amex	□ JCB		
Name of Card Holder:			Card ID:			
Card Number:			Expiry Date:			
Credit Card Holder	Signature	Date				
Confirmed by Shera	aton Imperial Kuala Lu	impur:				
Name:		· Signature:	Date	e:		
Diago cell Pagariet			as @starwaadhatala aar	m for further information or any		
assistance.				m for further information or any		
Please call the File Manager, Jane Ng at Tel: 60 3 2717 9823 or email <u>Jane.Ng@sheraton.com</u> for further information or any						

Please attach a photocopy of both sides of the credit card

assistance.

- Signature must correspond with the specimen signature on the card
- NOTE: Since we value the security of your data, please DO NOT e-mail us your credit card details but send this form along with your ID card to our secured fax number, +603 2721 2997.