

Reservation Form



浪景大酒店
River View
Hotel SINGAPORE

4th Asia Pacific Medical Education Conference

7 – 12 February 2007

Reservations may be made by completing this form and returning it to the Reservation Department
Tel: +65 6349 4888 / Fax: +65 6349 4830 / Email: river382@singnet.com.sg

From : _____ Fax : _____ E mail : _____

Room Type	Special Rates	Name of Guest(s)	Check In Date	Arrival Flight	Check Out Date
Superior Single (with 1 breakfast)	\$122+++				
Superior Twin/Double (with 2 breakfast)	\$134+++				
Deluxe Single (with 1 breakfast)	\$142+++				
Deluxe Twin/Double (with 2 breakfast)	\$154+++				

Remarks

- All rates are in SINGAPORE DOLLARS and subject to 10% service charge, 1% cess and prevailing goods and services tax.
- Check-in time is after 14:00 hour and Check-out time is before 12:00 hour (Early Check-in & Late Check-out will be subject to room availability and surcharges).
- All reservations will be confirmed upon received of credit card guarantee by filling up the information required below
- Please be advised that one night's room charges will be levied for no show or cancellation made less than 72 hours prior arrival.
- Room is subject to hotel availability unless confirmed in advanced.

Credit Card Guarantee : _____ Amex _____ Visa _____ Master _____

Credit Card No : _____ Expiry Date : _____

Credit Card Holder Name : _____ Signature : _____

Hotel Use

Confirmed by : _____ Date : _____ Confirmation No. : _____