假日酒店
Holiday Inn
香港金域
GOLDEN MILE HONG KONG

HOTEL RESERVATION FORM FOR
City University of Hong Kong
International Conference on Phonetics of the Languages in China (ICPLC-2013)
BOOKING ON 1 – 5 DECEMBER 2013

TO: Ms Michelle Wong, Business Development Executive – Holiday Inn Golden Mile Hong Kong
TEL: (852) 2315 1235 Fax: (852) 2723 1957 E-mail: michelle.wong@goldenmile.com

☐ **New Reservation** ☐ **Amend Reservation** ☐ **Cancellation**

Guest Name : _____ _____
(First Name) *(Surname)*

Arrival Date : _____ Arrival Flight: _____ ETA: _____

Departure Date : _____ Departure Flight: _____ ETD: _____

No. of Rooms & Room Rates: **Special rate for the period of 1 – 5 December 2013**

☐ _____ X Deluxe room at **HK$1,380.00*** per room per night
☐ _____ X Deluxe room at **HK$1,540.00*** per room per night (with one daily buffet breakfast)
☐ _____ X Deluxe room at **HK$1,700.00*** per room per night (with two daily buffet breakfasts)
(Above all offers with complementary in-room internet access)

Remark: Different room rates will be applied for any extension of stay. Please check with Ms Michelle Wong directly.

Your preference:

☐ Smoking ☐ Non-Smoking ☐ King-Size Bed ☐ Double-Double beds

* The above rates are subject to 10% service charge per room per night.
* The above rates are **only applicable for bookings confirmed on or before 8 November 2013**. Any new inquiry after the deadline will subject to hotel availability.
* 14-day cancellation notice is required, otherwise, one night room charge will be applied to the provided credit card.

Airport Transfer: ☐ Private Limousine at **HK$600** one way / ☐ **HK$1,150** round trip (4-seaters)
☐ "Door to Door" Shuttle Bus at **HK$130** per person per trip
* Please contact our Airport Transportation Counter "**B16**", located at Arrival Hall (Level 5) after clearing custom. Advance booking is required for limousine transfer.

Guest's Contact Information

Telephone No. : _____ Fax No. _____

E-mail Address: _____

Guarantee Notification

The above reservation(s) are guaranteed by:
Credit Card No.: _____ (Visa / Master / AMEX / JCB / Diners)

Expiry Date : _____ / _____ Cardholder's Name: _____

Hotel Use Only

☐ CONFIRMED (Ref. #_____) BY:_____ Date:_____
☐ NOT CONFIRMED

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