

MALL	7	ASIA		-				
			HO.	TEL	BOOKING	FORM		
PLEASE TYPE / WI	RITE	IN BLOCK LET	TERS (Best by pri	inting fr	om computer)			
Delegate and (Orga	nization det	ails:	1				
First Name	me : (Mr / Mrs / Ms)			Family Name	:			
Company Name	:				Email:			
Address	:				Country:			
Telephone	:				Fax:			
Arrival Flight	:			Arri	val Date :		Arrival Time :	
Departure Fligh			arture Date :		Departure Time :			
beparture ringi	•			Dep	arture bate .		beparture rime .	
Accompanying	per	sons			-	1		
(1) First Name : ((Mr / Mrs / Ms)				Family Name :		
(2) First Name	:	(Mr / Mrs /	Ms)			Family Name :		
Hotel Accommo	odat	ion						
Check-in Date			C	heck-	out Date:		No. of Nights :	
Room Type		☐ Twin	Single		Double			
Special Reque			ing Room		Non-Smoking	Room		
MICROTEL BY WYNDHAM - MALL OFASIA			Published Rate P 7,350.00 P 8,00.00 P 8,550.00		Room Rates (Peso/USD Equiv.) inclusive Taxes & Breakfast(s) Double City View -Php 4,400.00		Contact Details	
							Ms. Zeng Liwanag	
					□ Double C	orner: Php 5,600.00		
					1 11 11 11 11 11	emium -Php 5,600.00		
			2 24 5-25					
			P 9,700.00		Suite	Room -Php 6,300.00	F: +632 659 4226	
		Total Amour	nt Payable :					
** Rates are inclu	sive	of breakfast fo	or two all service	char	es and governm	ent tax		
** Rate for extra p			or two, an octace	Circing	jes and governm	CTIT LOSS.		
				-				
Non-guarante				atad.	antion data T	he deposit is nor	refundable	
automatically	Caric	elled the d	ay after the st	ateu	option date. 1	ne deposit is nor	i-refundable.	
Form of payme	nt							
Type of Card:			Visa [AME		☐ MasterCard		
Name of Card Holder :					Credit Card N	AND AND AND ADDRESS OF THE PARTY OF THE PART		
Expiry Date :					Authorized A	mount :		
Card Holder's S	Sing	nature :		-				
** All cancellation	s an	d changes sh	ould be sent in a	vriting	to the hotel direct	lv.		
, ii cancendiron	2 411	- Granges an	Laid De Beile III (Tunig	to the moter direct			
				+		Conforme:		