



**ROOM RESERVATION FORM
 ICTD CONFERENCE
 14 MAY 2015 TO 18 MAY 2015**

New Reservations

Amendment

Cancellations

Please return this hotel reservation form to :
Shyidah Mahadi / Hazel Lin / Beverly Teo
 Tel : (65) 6731 7159 or 7147 or 7148 / HP : (65) 9297 4908 / (65) 9145 7355 / Fax : (65) 6734 3968
 E-mail : shyidah.mahadi@ihg.com or hazel.lin@ihg.com or beverly.teo@ihg.com

Names & Flight Details	Confirmation Number:
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*(Mr / Mrs / Ms / Dr)

_____ (Family Name) _____ (Given Name)

(Mr / Mrs / Ms / Dr)

_____ (Family Name) _____ (Given Name)

*Arrival Date :	VIA (Flight #)	Arrival Time
*Departure Date :	VIA (Flight #)	Departure Time

Remarks:

Accommodation Requirement

No. of Rooms	Room Type	No. of Guests :		*Room Rate Per room Per Night Inclusive of breakfast(s) and internet	
		Adult	Child		
	Superior Room			<input type="checkbox"/> S\$240.00++(Single)	<input type="checkbox"/> S\$260.00++(Double)
	Deluxe Room			<input type="checkbox"/> S\$260.00++(Single)	<input type="checkbox"/> S\$280.00++(Double)
	Executive Room			<input type="checkbox"/> S\$320.00++(Single)	<input type="checkbox"/> S\$340.00++(Double)

Above Rates include:

- Extra Bed is available at S\$85.00++ per bed per day (bed with 01 daily buffet breakfast only)
- Rates quoted at in Singapore Dollars and will be charged in Singapore Dollars.
- All rates are subject to 10% service charges and 7% government taxes unless otherwise stated 'nett'.

Terms and Conditions

- Above rates are valid for the period **14 to 18 May 2015** including pre and post two days of the event date.
- Cut-off date for reservation is by **20 April 2015**.
- **No rooms are blocked and it will be subject to availability upon making of reservations.**
- Guestroom reservations **must be guaranteed by credit card.**
- If a reservation is cancelled less than 7 days prior to the date of check-in, a cancellation fee equivalent to one (1) night's accommodation rate will apply. A no-show fee equivalent to one (1) night's accommodation rate will also apply.
- The check-in time is 2pm and check-out time is 12 noon. **Requests for earlier check-in or extended check-out are subject to availability and this may be guaranteed by reserving an additional night prior to or after the intended length of stay.**
 * refer to mandatory field. This field must be complete otherwise reservations require will be considered null.

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Reg No. 40516800D



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PAYMENT INSTRUCTIONS

*** Guest to settle all rooms and incidental charges upon departure. Guest's Signature: Date:	HOTEL USE ONLY Reservations Confirmed by:
	Billing/Payment Instructions: Personal Account Date : Signature & Hotel Stamp:
*Credit Card Number : *Expiry Date : *Name on Credit Card : *Telephone No: *Email Address:	*(Amex / Visa / MasterCard) ~ Please select one