

ROOM RESERVATION FORM

Registrant's Name					
C.		Sumame First Name			
Company	: ACADEMIC RE	ACADEMIC RESEARCH SOCIETY OF MALAYSIA			
Mailing Address	:				
	City / State		Country		
Tel No :		Fax No	:		
Arrival Date :		Flight Details	:		
Departure Date :		Flight Details	nt Details :		
No of Room(s) :		No of Guest(s)			
	Ви	siness at Thistle			
			Room witl	n Breakfast	
		Single / Double (RM)	Single (RM)	Double (RM)	
Deluxe		(*****)	260.00nett		
Deluxe Seaview			290.00nett		
Extra Bed		82.00nett	105.00nett	-	
	Ex	ecutive at Thistle			
Executive			500.00nett		
Executive Seaview			650.00nett		
Junior Suite			1,200.00nett		
Family Suite			1,320.00nett		
Thistle Suite			1,950.00nett		
Extra Bed			140.00nett		
Special Request	() King Bed	() Twin Bed	() Twin Bed () Smoking Floor () Non Smoking Floor		
Effective 1 st September 2018, Room preferences are subject Breakfast is at additional RM	to availability		e tax		
GUARANTEE (Please comple	te to guarantee your reserva	ntion)			
VISA () MASTERCAR	D () AMEX ()	DINERS ()			
Full Name of Card Holder		Expiry Date			
No Show - 100% of total r Please note that the cut off Room bookings are subject	d to charge your credit card solicy val date - 1 night room charge date for all hotel room bool t to the availability of the re	ge king is <mark>28th February 2019</mark>		w fee.	

- A full day surcharge will be applicable for a guaranteed check-in before 0900hrs EMAIL EVENT/SALES TEAM BEFORE 28th February 2019 **EVENT TEAM AT TEL NO: 012 787 9227 (Atul)**
- **EMAIL**: qurratul.aminuddin@thistle.com.my

In the event of early check-in before 1200hrs, a 50% surcharge will be applicable,