YORK HOTEL
SINGAPORE

HABITAT FOR HUMANITY INTERNATIONAL AND SINGAPORE INSTITUTE OF PLANNERS SEMINAR: 1ST ASIA-PACIFIC HOUSING FORUM (24TH – 26TH SEPTEMBER 2007)

RESERVATION FORM

To make the hotel reservation, please complete this form and return with credit card details to Ms Zen Lim, Assistant Sales Manager for York Hotel.
DID: (65) 6830 1126 Fax: (65) 6738 5810 Email: rsm8@yorkhotel.com.sg
Forms must be received by the hotel before **3rd September 2007**.

Type of Room (Room Only)	Room Rate	Please Tick Accordingly	No. of Nights	Check In Date	Check Out Date
Tower Suite Single/ Twin	SGD 275.00++	( )			

*Additional American Buffet Breakfast can be arranged at SGD 20.00++ per person per day.
( ) Yes ( ) No

*Extra Single Bed can be arranged at SGD 60.00++ per room per day.
( ) Yes ( ) No

**All rates quoted herein are exclusive of 10% service charge & prevailing government taxes per room per night

GUEST DETAILS

Family Name : (Dr/ Mr/ Mrs/ Ms) _____ First Name : _____

Family Name : (Dr/ Mr/ Mrs/ Ms) _____ First Name : _____

Arrival Date : _____ Estimated Arrival Time : _____

Departure Date : _____ Estimate Departure Time : _____

FOR GUARANTEE PURPOSE & HOTEL CANCELLATION POLICY

All reservations must be guaranteed with credit card number & its expiry date. For guaranteed reservation rooms, it will be held till 12.00 noon the next day. There will be STRICTLY no cancellation or shorten of stay **after** 24th August 2007, the entire duration of guaranteed stay will be charged accordingly.

I hereby authorize to guarantee the room reservation with the credit card details as follows:

Name of Card Holder : (Dr/ Mr/ Mrs/ Ms) _____

Credit Card Number : _____ Expiry Date : _____

☐ VISA ☐ MASTERCARD ☐ AMEX ☐ JCB ☐ DINERS

Signature : _____