



For Hotel use only
Confirmed by :
Confirmation No :
Date :

PARTICIPANT ROOM RESERVATION FORM
PILE 2017

26 - 27 September 2017

(Please complete this form and fax to Sales Department at 62 361 753988 Attention **Ruriesa Nisma Putri**
or email ruriesa@discoverykartikaplaaza.com with signature at the bottom

Guest Name : 1. _____ (Mr / Mrs / Ms)
2. _____ (Mr / Mrs / Ms)
3. _____ (Mr / Mrs / Ms)
(Please copy this form if the number of guests are more than 3 persons)

No. of persons : _____ Total No. of rooms : _____
Company : _____

Arrival Date : _____ Time : _____
Departure Date : _____ Time : _____

Type of Rooms : ☐ Deluxe Room IDR 1.250.000 net / room / night
☐ Ocean Facing Room IDR 1.350.000 net / room / night
☐ Ocean Front Room IDR 3.000.000 net / room / night
☐ Junior Suite IDR 3.200.000 net / room / night

Mode of Payment : ☐ CASH For cash payment, please transfer to Bank Mandiri KCP Teuku Umar,
Under name : Discovery Kartika Plaza Hotel
Acc. IDR 145-0092071659
Please attach copy of bank transfer along with this registration form
Bank Fee will be on Guest responsibility

☐ CREDIT CARD Type : (Visa / Master Card / Amex) Bank : _____
Holder's Name : _____
No : _____ Expiry Date : ____/____

Transfer Arrangement : ☐ Airport - Hotel IDR 250.000 net/car/way Flight Details : _____
: ☐ Hotel - Airport IDR 250.000 net/car/way Flight Details : _____

Terms & conditions

1. To guarantee your room reservation, a one night room charge deposit is required. Delegates will settle their own bills with hotel front cashier prior to departure.
2. Check in time is 14:00 hrs and check out time is 12:00 hrs. Any late check out is subject to 50% charge of the room rate applied.
3. Cancellation must be made 30 days in advance before arrival date, otherwise your card will be charged for one night stay. Cancellation after 14 days prior to the arrival date, will be charged entire night stay.
4. For No show, your card will be charged for the entire room booking. For No show, early departure, full cancellation fee is applied and deposit will not be refundable.
5. Any additional night after the conference period, the room rate is subject to the hotel publish rate.

Reservation Made By : _____
Company : _____
Address : _____
Ph : _____ Fax : _____

REMARKS :

1. The room rate is inclusive 21% government tax & service charge.
2. The room rate is inclusive breakfast for max. 2 persons.
3. Flight detail must be informed clearly if you need transfer arrangement provided by the hotel.
4. Should you wish to be picked up by hotel, column must be marked up
Otherwise hotel will not provide any airport transfer

Booked By, _____

Authorized Signature booker & name _____