

VGCR- Vietnam 2009

16th – 22nd October 2009, Hanoi Daewoo Hotel, Vietnam

HOTEL BOOKING FORM

Please return completed form to Reservation at Fax +84 4 3831 5500 or E-mail us at reservation@daewoohotel.com.vn					
DELEGATE'S INFORMATION (PLEASE TYPE OR WRITE IN BLOCK LETTERS)					
Family Name:	of □ Dr □ Mr □ M	First Name:			
□ Prof. □ Dr. □ Mr □ Ms □ Mrs					
Organization: Position:					
Passport No.: Nationality:					
Visa No.: yet obtained			□ I do not require visa	□ I require visa but not	
Address:					
			Country:		
	_		-		
Tel: Fax: *E-mail: Hotel confirmation will be sent to the *email address given. Please include other email address(s) for the same confirmation to be					
copied to.					
HOTEL RESERVATION					
 Rates quoted are on a per room per night basis and inclusive 5% service charge and 5% VAT. Reservation confirmation can only be made with valid credit card information as a quarantee. 					
Any individual cancellation advised 30 days, 14 days, 7 days and 48 hrs prior to actual arrival, will be charged 30%, 50%, 80% and 100% of on the total room charge respectively.					
Hotel	Room only Ra	ate (Club Room inclus Please indicate yoι	ive of daily buffet breakfast) ur selection.	Check-in Check-out Date Date	
	Room Type	□ Single □ Tv	win □ Double Occupancy		
Hanoi Daewoo Hotel 360 Kim Ma Str.	Deluxe Room	•	(inclusive 01 daily BBF)	- /	
Ba Dinh Dist. Hanoi,		Double/Twin: US\$ 15	50nett (inclusive 02 daily BBF)		
Vietnam Tel: +84 4 3831 5000	Club Room Single: US\$ 160nett		(inclusive 04 daily PRE)		
			32nett (inclusive 02 daily BBF)		
Fax: +84 4 3831 5500	** All guests can c	heck in 1400hrs and che			
TRANSPORT DETAILS					
Arrival Date:		Arrival Time:	Flight No.:		
Departure Date:		Departure Time:	Flight No.:		
Airport Transfer Required: □ Yes □ No					
Rate: UD\$ 60 nett per car per way, maximum 3 persons per car.					
Note: Noi Bai Airport is extremely busy. Please note that our driver will be holding a signboard with your name printed on it.					
CREDIT CARD DETAILS (INFORMATION IS REQUIRED IN ORDER TO GUARANTEE YOUR BOOKING OF HOTEL)					
Credit Card [] MasterCard [] Visa [] Diners [] AMEX					
Cardholder's name: Card no.:					
Authorized Signature: CVC Code* Expiry Date:					
(as in credit card if applicable)		 You need to fill out your CVC code (3 digit number on the back of your credit card following by the credit card number) 			
AUTHORIZATION					
☐ Yes. By sending in this form, I acknowledge that I commit myself to the payment of late cancellation or no-show room charge. I have taken notice of the cancellation terms on this form.					
Date: Signature:					
Signature.					

For any further questions, please contact: