
KERRY HOTEL

Hong Kong

香港嘉里酒店

Room Reservation Form**SIAM Conference on Applied Linear Algebra (SIAM-ALA18) May 4 – 8, 2018****Hong Kong Baptist University**

Please return to Mr Alex Yuen

Tel: +852 2252 5827, Fax: +852 3547 8266 or E-mail: alex.yuen@thekerryhotels.com

Salutation _____ Family Name _____ First Name _____

Check-In Date (DD/MM/YY) _____ Check-Out Date (DD/MM/YY) _____

Arrival Flight / Departure Flight _____ ETA / ETD _____

Company _____ Title _____

Golden Circle Member Number _____

Tel / Fax _____ E-mail _____

To enjoy the Shangri-La Express Check-in Programme, please complete the following information:

(Please present your Business Card upon check in)

Passport No. _____ Nationality _____

Room Requirement (only a limited room block is reserved, bookings are processed on a first-come-first-served basis)

<u>Room Category</u>	<u>Single / Double (Room with breakfast)</u>	<u>No. of rooms required</u>
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Deluxe City View Room	HK\$1,400 / HK\$1,600	_____
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- 1) The above room rates subject to 10% service charge per room per night
- 2) The above room rates included daily buffet breakfast in Big Bay Café, Level 3
- 3) Any cancellation or amendment must be made by Friday, April 4, 2018
- 4) For no-show, cancellation, amendment made after Friday, April 4, 2018, ALL forfeited room nights will be charged at daily room rate as penalty to the credit card provided at the time of reservation.

Special Request * _____ (* Subject to availability)

Check-In / Check-Out Times

- 1) Check-in time is from 15:00 hrs on the day of arrival. Delegate who wishes to occupy guest room before 15:00 hrs must reserve the guest room for a night prior to the arrival date.
- 2) Check-out time is by 12:00 hrs on the day of departure. Delegate who checks out after the official check out time of 12:00 hrs shall be charged for additional night under the Daily Room Rate.

Room Reservation Guarantee (reservation cannot be made without the following information)

Credit Card Type _____ Credit Card No. _____ Expiry Date _____

Credit Card Holder's Print Name _____

Credit Card Holder's Signature _____

Date _____

**Should you wish to settle the room payment in advance, kindly contact us via e-mail or fax to obtain more information.

Hotel confirmation will be sent to the e-mail address above.