

RESERVATION FORM THE MALAYSIAN SOCIETY RADIOGRAPHERS 4TH – 6TH MARCH 2016

A:	Personal	Inform	ation

Name of Guest :		
Company's Name :		
Address :		
Contact Number (Office/Residence):	Mobile No. :	
Email address :		
NRIC / PASSPORT NO:		
B: Reservation Information		
Day/Date of Arrival (Check-in date) :	Flight Details / ETA:	
Day/Date of Departure (Check-out date):	Flight Details / ETD :	
Room Reservation details:	Y	

Room type Room rate (per room/night) Inclusive of breakfast Superior Room (Single) RM 185.00nett Superior Room (Twin Sharing) Deluxe Room (Single) RM 210.00nett RM 210.00nett

Delane Room (Single)		
Deluxe Room (Twin	RM230.00nett	
Sharing)		
Executive Suite	RM 450.00nett	
Extra Bed	RM100.00nett	

1-100 2003/00	11 10 1011 1011 1011	-	12400	1000
No. of Persons:	Adult {	}	Children {	}

Remarks: (E.g –Single or twin bed, Food Allergy, Higher Floor, Near Lift etc)

RESERVATION/ROOM BOOKING PROCEDURE

1. All reservation must be pre-booked directly with The Klagan Regency, Kota Kinabalu, Sabah at:-

Tel: 088 529 888 by Fax: 088 529 889 or via email at <u>reservations@theklaganregency.com</u>, on or before (Cut-off date), after which, any room reservation will be subject to best available rate (BAR) and room availability basis.

- 2. For **Guaranteed Reservations** an amount equivalent to a one (1) night's room charge (based on the agreed rate shall be levied on reservation cancelled within 72 hours or in the event there is a "NO Show".
- -A 50% charge on one (1) night's charge (based on agreed rate) shall be imposed on shortened stay or early departure in less than 24 hours' notice.
- -Non-Guaranteed reservation shall automatically be considered as Waiting List reservations.
- -A collection of one (01) night room rate based on room category's rates as compulsory deposit upon check-in (i.e. either by cash, company cheque or Credit Card verification) unless otherwise stated.
- 3. Hotel's official check-in time is at 1500 hour (3:00pm) & check-out time is at 1200 hour (12:00nn).



C: Payment Details/Confirmation Details 1. Reservation guaranteed with { } CASH RM (Ringgit Malaysia):						
Official Receipt No. (For Office Purposes):						
2. Credit Card:						
CREDIT CARD NO:	1	CCV NO :				
CARD HOLDER NAME :		EXPIRY DATE :				
CARD TYPE: VISA / MASTER (delete where ap	ppropriate)	AMOUNT:				
	-					
Signature : (Same signature as on your credit card)	Date	:(dd/mm/yyyy)				
Name :	Designation	:				
I hereby authorized The Klagan Regency (Rick Klagan Sdn Bhd) to charge all amount due from me to the credit card stated above, I also authorise to take all necessary action to obtain payment from the relevant credit card company. I warrant as of the date below that the details of the credit card set out above are correct and that the credit card is valid and has not been withdrawn and cancelled. I warrant that I will ensure to notify any changes to the credit card information forthwith.						
Reservation taken by:	Date	:				
Email: reservations@theklaganregency.com	Tel: +60 88 528 999	Fax: +60 88 529 889				
TERMS OF PAYMENT To confirm a booking, reservation must be guaranteed by:- 1) Advance Payment either Cash, Cheque or Credit Card. (For direct bank-in, kindly email or fax copy of your transaction slip together with this Reservation Form) 2) Credit Card Payment – We would require detail such as Type of Card, Card Number, Security Code, Expiry Date and Name Printed on Card. Any deposit has been made or payment is not refundable. Payment by Cash / Cheque must be made payable to:						
Cash or Cheque payment to be made to:						
Bank : Account Number :	THE KLAGAN REGENCY RHB BANK BERHAD 2 - 10112 - 0000939 - 6 RHBBMYKL					
	made to:- THE KLAGAN RHB BANK BERHAD					

Thank you and we look forward to welcome you to The Klagan Regency. For further inquiry, kindly contact us at +6 088 529 888 or email at info@theklaganregency.com.

: 2 - 10028 - 0015945 - 4

Account Number