# NIE – World Association of Lesson Studies (WALS) 2012 Conference

# Room Reservation Form

**Please submit this room reservation form together with a photocopy of the front & back of credit card with credit card authorization form as stated below via fax at 65-67339976 or**

**e-mail: winston@relc.org.sg**

Reservation is subject to the room availability and the confirmation of the room will be send via email.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of guest** | : | | |
| **Passport no** | : | | |
| **Fax no with country code** | : | | |
| **Email** | : | | |
| **Date of arrival/flight details** | : | | |
| **Date of departure/flight details** | **:** | | |
| **Type of room** | **Room rates** | **No of room required** | **Remarks** |
| **Single / Twin** | $155.00++ |  |  |
| **Triple** | $200.00++ |  |  |
| **Breakfast (optional)** | $10.00++ |  |  |

**The above rates are in Singapore Dollars subject to 10% service charge and applicable GST without breakfast.**

**Terms & Conditions**

Check-in time: 2.00 pm Check-out time: 12.00 noon

Early arrival and late departure will be levied at a half-day charge and subject to availability.

Cut off time will be on the date of arrival and if the guest arrives later than 6 pm, please notify Reservation at 65-6885 7800 or Reception Desk at 65-6885 7888.

**Guaranteed:**

All reservations have to be guaranteed by credit card. All non-guaranteed reservations will be released by 1800 hrs on arrival date. An imprint of your credit card will be obtained upon your arrival for billing purpose.

**Cancellation & No-Show Policy**:

Reservations must be cancelled 48 hours prior to the day of arrival to avoid charges. Otherwise, a one night room charge based on the confirmed room rate will be levied to the Credit Card or Company, in the event no-show.

**\* Credit Card**

Please complete the authorization form.

|  |  |  |
| --- | --- | --- |
| **CREDIT CARD AUTHORIZATION FORM** | | |
| ***INSTRUCTIONS*** | | | |
| *Please complete the information and fax to RELC International Hotel at 6733 9976.* | | | |
|  | | | |
| Date : ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
|  | | | |
| **BOOKING DETAILS** | |  |  |
| Group | | : | World Association of Lesson Studies (WALS) 2012 Conference |
| Guest Name | | : |  |
| Arrival Date | | : |  |
| Departure Date | | : |  |
| No of nights | | : |  |
|  | |  |  |
| **DETAILS OF CREDIT CARD HOLDER** | |  |  |
| Type of Card | | : |  |
| Name of Cardholder | | : |  |
| Credit Card Number | | : |  |
| Credit Card Security Code | | : |  |
| Credit Card Issuance Bank | | : |  |
| Expiry Date | | : |  |
| Amount to be Debited | | : |  |
|  | |  |  |
| Signature of Cardholder | | : |  |
|  | |  |  |
| **CREDIT CARD AUTHORIZATION** | |  |  |
| I hereby authorize RELC International Hotel to charge the amount for the reservation made | | | |
| to my credit card detailed above. This authorization shall remain in force until I have expressly | | | |
| revoked it by notice in writing delivered to and received by you. | | | |
|  | | | |
| **FOR OFFICIAL USE** | | | |
|  | |  |  |
| Received & Processed By | | : |  |
|  | |  |  |
| Verified By | | : |  |
|  | |  |  |
| Date | | : |  |
|  | |  |  |
| Folio Number | |  |  |
|  | |  |  |
|  | |  |  |
| **Condition For Refund:** | | |  |
| ***For any refund of prepayment made through AMEX or DINERS,*** | | | |
| ***there will be an administrative charge imposed*** | | | |