



HOTEL RESERVATION FORM

International Congress on Education for 21st Century

“Making a Difference: Shaping a New Learning Paradigm for a Sustainable Southeast Asia”

3rd – 4th May 2017 in Thailand

Guest's Name: 1. _____

2. _____

Organization: _____

Mobile Phone No.: _____ E-mail: _____

Check-in Date: _____ Check-out Date: _____ Total Night _____ Night(s)

ACCOMODATION PRICE (Single Stay/ Twin Stay)

Premier Room 2,300 THB/room/night incl. Breakfast → Single Stay _____ rooms / Twin Stay _____ rooms

Luxury Room 2,500 THB/room/night incl. Breakfast → Single Stay _____ rooms / Twin Stay _____ rooms

Premier Family Room 3,300 THB/room/night incl. Breakfast → Single Stay _____ rooms / Twin Stay _____ rooms

Luxury Corner Suite 4,000 THB/room/night incl. Breakfast → Single Stay _____ rooms / Twin Stay _____ rooms

Extra Bed 1,000 THB/room/night incl. Breakfast → Total _____ bed

Conditions & Payment:

- The above offered rates are applied from **the night of May 2nd to the night of May 5th, 2017** only.
- Every room price covers **maximum 2 persons a room**.
- **A deposit equivalent to one night accommodation is required upon the reservation is made.**
- Payment by **Credit Card**, please fill in The Authorization of Charge Form (**Page 2**) **OR** payment by **Bank Transfer**, please transfer to the bank account and send the pay-in slip to the hotel (**Page 3**).
- The balance is to be paid upon check-in.
- A deposit for hotel keycard of **1,000 THB/room** is required upon check-in and the amount will be returned upon check-out if there is no loss or damage.
- **All reservations are subject to room availability at the time of this reservation received.**
- Any amendment of your reservation, the hotel must be informed **before 20 April 2017 during weekdays**.
- Check-in time **start from 15.00 hrs. Onwards** and check-out **before 12.00 hrs. midday**
- Please fill the reservation form and send to our reservation team as below;-

Reservation Department : **Khun Siriporn Pinitsub**

Telephone No. : **02 309 9999 Ext. 3011, 3014, 3031, 3033**

FAX. No. : **02 309 9900**

Email : **rsvn@berkeleyhotel.co.th**



The Authorization of Charge



Cardholder's name :

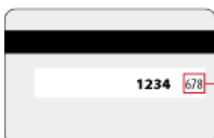
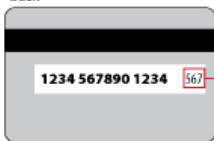
Credit Card Number :

Expiration :

front



back



Enter the last 3 digits on the back of your credit card:
(or last 4 digits for American express)

Verification Number

Amount Authorized :Baht (THB)

Booking Number :

Guest Name :

Arrival Date :

Departure Date :

I here with authorize The Berkeley Hotel Pratunam to charge the above stated amount on the card.

Authorized Signature :

Date :

Remark:

Photo copy of credit card - Front -	Photo copy of credit card - Back -
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Bank Transfer

Company Name: Great China Millennium (Thailand) Co., Ltd.

Bank Name: Kasikorn Bank

Branch: Bobae Tower

Account Type: Saving Account

Account No: 798-2-09113-0

Company Name: Great China Millennium (Thailand) Co., Ltd.

Bank Name: Bangkok Bank

Branch: Pratunam

Account Type: Saving Account

Account No: 106-552 999-0

- After transferring, please kindly send your pay-in slip to –

Email: crm@berkeleyhotel.co.th

Fax: 02 309 9900