



HOTEL RESERVATION FORM

Hong Kong College of Radiologists

Annual Scientific Meeting 2019 Accommodation during period of November 9 - 18, 2019

L'hotel Island South is pleased to offer special room rates for guests attending this special event. Should you require hotel reservation made under your name, please complete this form and fax at (852) 3968 8899 or email to Mr. Brian Leong – Assistant Sales Manager at brianleong@lhotelgroup.com or Ms. Rebecca Lee – Sales Coordinator at rebeccalee@lhotelgroup.com by latest on or before **October 25, 2019 (Friday)**. Any bookings received after October 25, 2019 (Friday) is subject to new room rates at time of booking.

1st Guest Name : Mr/ Ms/ Mrs (Last Name) _____ (First Name) _____

Email: _____ Telephone Number: Area code: _____

2nd Guest Name : Mr/ Ms/ Mrs (Last Name) _____ (First Name) _____

Email: _____ Telephone Number: Area code: _____

Check-in Date : November _____, 2019 Flight Details : (Flight Number) _____ (ETA) _____

Check-out Date : November _____, 2019 Flight Details : (Flight Number) _____ (ETD) _____

Room Type : City View Room (With Room Size: 300 sq. feet)

Single Occupancy – HK\$ 880.00* : Room with ONE daily buffet breakfast at LIS Café, P3

Double Occupancy – HK\$ 960.00* : Room with TWO daily buffet breakfast at LIS Café, P3

* All above room rates are subject to 10% service charge per room per night.

Official Check In / Out Time

- Check-in time is 2:00 pm on the day of arrival
- Check-out time is 12:00 noon on the day of departure
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- Privileges:**
- Complimentary Wi-Fi internet access
 - Complimentary local calls
 - Complimentary use of gymnasium and outdoor swimming pool (subject to availability)
 - Welcome Fruit

Special Request (subject to availability):-

Non Smoking Floor Smoking Floor King Bed Twin Bed Others: _____

Booking Cancellation Policy:-

Once guaranteed, cancellation made before October 25, 2019 will subject to one night room charge as cancellation fee. Cancellation made on or after October 25, 2019 or no show on the arrival date. Whole period room charge will be levied as cancellation fee.

All reservation must be guaranteed by credit card to secure room space only (Union Pay is not accepted for guarantee). All room charges to be settled upon arrival.

Type of Card : VISA MASTER JCB

Credit Card No.: | | | | | | | | | | | | | | | | | | | | | |

Expiry Date : ____ / ____

Card Holder Name: _____

Signature : _____

Payment:-

- by cash or credit card upon arrival
- by Telegraphic Transfer (room payment is requested by hotel before October 25, 2019, bank details will be provided once booking is confirmed)
- by third party payment of credit card (Please fill in the provided authorization form with the copy of credit card copy)

For Hotel Use:

Hotel Confirmation Number : _____

Date: _____