

Con	act Pe		RESERVATION FORM	Email:	HOTELS & RESORTS BANGKOK BANGNA			PLEASE SUBMIT THIS FORM TO: reservations@novotelbangkokbangna.com					
Guest Details							oking		Room Type / Rates (inclusive current Thai Government Tax and Service				
Mr.	Ms.	Child	First Name	Last Name	Email	Yes	No	Single Standard THB. 2,000	Twn/Dbl Standard THB.2,400	Single Superior THB. 2,800	Twn/Dbl Superior THB.3,200	Extra Bed THB. 1,200	
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Arrival / Departure Details							Private Limousine Transfer Service						
Arrival Date		е	Arrival Flight / Time Hrs.	Departure Date	Departure Flight / Time Hrs.			Airport to I Yes	Hotel No		Hotel to Air Yes	port No	
Deposit 50% is Required at Time of Reservation; other expenses to be settle upon departure Payment by Company with Money Transfer Account Name: EUROMILL HOTEL CO., LTD.							Rate THB. 1,000 net per car per way for maximum 3 passengers Rate THB. 1,400 net per Van per way for maximum 8 passengers						
Fax: 02366 0502 Bank nan				Bank name / Branch: Bangko	nk name / Branch: Bangkok Bank / Bangna Branch			Additional Requirements					
process the payment for my accommodation of the			horized Novotel Bangkok Bangna to payment for my accommodation of the	VISA / Master Credit Card No: Card Holder Name:	American Express								
			nit a clear copy of both sides of the ous along with this document.	Expiration Date :	Cardholder Signature				F	or Official Use C	only		
Terms and Conditions													

- Full Payment is required at the time of reservation, to be made by credit card or money transfer.
- Any Cancellation or amendment 14 days prior to arrival date is allowed and refundable.
- Any Cancellation or amendment after 14 days prior to arrival date will be charge 1 night.



NOVOTEL BANGKOK BANGNA

BILLING AUTHORIZATION FORM

Please complete the following form and fax it back to $(66)\ 0\ 2366\text{-}0502$ or Email: reservations@novotelbangkokbangna.com

I,	hereby authorize	ed the Novotel Bangkok Bangna to charge
My credit card number Exp. Date	○Visa /Master ○ American Expres	s Other
Please charge (select one): (_) GUARANTEED LIMOUSINE Incase of No-Show, full of char	ONLY rge will be applied to your given credit card
	(_) GUARANTEED PAYMENT (ONLY
	(_) ROOM AND BREAKFAST O	NLY
	(_) ALL EXPENSES	
For charges incurred by M (Enter name of guest)	Ir/Ms:	
FROM	TO	(enter dates)
FROM	TO	(enter dates)
Cardholder's information:		
Address:	Phone:	
	Fax:	
	Signature:	

^{**} We required a clear **photocopy of the front and back of the credit card** being used for the charges on this form. We suggest you set the copier on a light mode and enlarge it.