

RESERVATION FORM

Lightbox Radiology Education Course Meeting Group (11-14 October 2018) Group Code: (3HP16O)

Guest Name : (Last) (First)			Company Name :			
Mr / Mrs / Ms						
Arrival Date :	al Date :					
Arrival Flight / ETA :			Departure Flight / ETD:			
Telephone Number:		Facsimile Number :		E-mail :		
Room Type / Daily Room Rate (single / double occupancy) :					Room Preference (subject to	to availability):
Run of house (280 sq ft / 26 sq m) HK\$2,00					☐ Smoking	☐ Non-Smoking
Superior Side Harbour Vie	HK\$2,200		☐ King Bed	☐ Twin Bed		
Deluxe Harbour View Room (366 sq ft / 34 sq m)					Others	
Daily breakfast at Café on the 1st			HK\$200			
Rates are subject to 10% service charge and prevailing government tax (subject to government regulations) per room per night						
Each room category carries a fixed inventory within the group block. Alternate room categories and the respective rate will be applied if the requested category is not available.						
The above rates are inclusive of :-						
Complimentary use of The Excelsior Wellness Centre (except massage and spa treatments)						
* Complimentary in-room internet access (extend usage in meeting room)						
Free use of handy phone						
Arrival Transfer : (Please efer to the attached airport	Hotel Shuttle (HK\$140 per person per trip / HK\$280 for roundtrip)				☐ One way	Roundtrip
					☐ One way	Roundtrip
Full charges will be levied in the event of "no show" or for a cancellation received less than 2 hours prior to reserved time.						
Credit Card Number for Reservation Guarantee :				Card Holder Name :		
☐ Amex ☐ Visa ☐ Master ☐ Diners ☐ Others ()				Expiry Date :		
Ferms and Condition:-						
All reservations must be guaranteed by credit card at the time of booking; otherwise, The Excelsior reserves the right to release non-guaranteed reservations.						
Once guaranteed, a one night room charge will be posted to the credit card in case of no show, amendment or cancellation after 13 September 2018.						
Check-in time is 2pm and the check-out time is 12 noon. For an extension up to 6pm, 50% of the daily room rate will be charged. After 6pm, the full day room rate will be applied.						
/ We agree the above terms and condition and to guarantee this reservation by the credit card number provided above						
Accepted and Signed by (Name in Block Letter)				Signature:		
Reservation requested by :	:			Company:		
Telephone Number:		Facsimile Number :		E-mail:		
Please forward the above reservation before 13 September 2018 to Reservations Department via facsimile on (852) 2576 7715 or e-mail: exhkg-reservations@mohg.com.						
Hotel Confirmation Numb	per (For Hotel Use) :					
Hotel Confirmation Number: Confirmed By:				Date :		

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