

BAYVIEW HOTEL GEORGETOWN PENANG

NO. 25-A, FARQUHAR STREET, 10200 PENANG

TEL : 04 - 263 3161 FAX : 04-263 4124

WEBSITE : www.bayviewhotels.com

EMAIL : reservations.bhgp@bayviewhotels.com

Hotel Room Reservation Form 酒店预订表

Guest Name :	<input type="text"/>		
I.C. No :	<input type="text"/>	Check-in Date :	<input type="text"/>
Contact No :	<input type="text"/>	Check-out Date:	<input type="text"/>
Email :	<input type="text"/>	Mobile No :	<input type="text"/>
Flight ETA :	<input type="text"/>	Flight No :	<input type="text"/>

1. Please indicate number of room require ****Valid for stay period 11 - 15 April 2017 only**
2. Booking Cut-off date: 28th February 2017 & booking confirmation is subject room availability.
3. Check-in time : After 3pm; Check-out time: 12 noon *** Please note that bed type is subject to room availability.**

<input type="checkbox"/>	Superior Single @ RM225.00nett per room/night with Breakfast for 01 person
<input type="checkbox"/>	Superior Twin @ RM248.32nett per room /night with Breakfast for 02 persons
<input type="checkbox"/>	Deluxe Single @ RM255.00nett per room /night with Breakfast for 01 person
<input type="checkbox"/>	Deluxe Twin @ RM278.32nett per room/night with Breakfast for 02 persons
<input type="checkbox"/>	Extra bed @ RM90.00nett per bed /night with Breakfast for 01 person

***Effective 1st June 2014, there will be an additional Local Government Fee impose by Penang State Government of RM3.00nett per room per night which **MUST** be paid by the individual guest upon check-in. This RM3.00nett is Not Included in the room rate quoted.**

Remarks : _____

Mode of Payment - (A) By Credit Card

Name of Card Holder	<input type="text"/>		
Credit Card Number	<input type="text"/>		
Credit Card Type (Amex / Visa / Master)	<input type="text"/>	Card Holder's Signature	
Expiry Date	<input type="text"/>	<input type="text"/>	
CVV (3 digits at the back of the card)	<input type="text"/>		

****Please attach a photocopy with both side of the credit card to verify the signature.
Deposit won't be refund for any cancellation 03 working-days before check-in date.**

Mode of Payment - (B) By Cheque

Cheque made payable to : **Bayview Hotel Sdn. Bhd.**
MAYBANK A/C : **507 0400 16779**
Fax bank-in slip to : **04-263 4124**
or email to : **reservations.bhgp@bayviewhotels.com / cath.tan@bayviewhotels.com**
Person-in- contact : **Ms. Yoges 04-263 3161 ext: 209 / Ms Catherine Tan 04-263 3161 ext: 233**

For Hotel use only

Confirmed By	<input type="text"/>
Confirmation No. #	<input type="text"/>
Booking Code #	PELLTA110417