HOA BINH HOTEL

APNIC 20

6-9 September 2005

HOTEL RESERVATION FORM

Last name:		First & middle name:	
Additional guest	name:		
Company:			
Address:			
		Country:	
Phone:	Fax:	Email:	
I would like to b	oook a hotel room as t	follows:	
Arrival date/Flight number:		<i>_</i>	
Departure date/Flight number:			
□ Superior F	Room – Single use	US\$44 per night*	
Superior F	Room – Double use	US\$55 per night*	
🗆 Deluxe Ro	luxe Room – Single use US\$50 per night*		
🗆 Deluxe Ro	oom – Double use	US\$60 per night*	
□ Non-smoking room □ Smoking room			
*Rates include brea	kfast, service charge and V	VAT.	
Credit card infor	mation		
Credit Card type	: VISA, MASTER, AN	IEX, DINERS, JCB, Other:	
Card number:		Expiration date:	
Card holder name:		Signature:	

Please note:

- Confirmation: You will receive hotel confirmation by fax or email.
- Every reservation must be guaranteed with a credit card. Without any guarantee, the reservation will be automatically cancelled by the hotel.
- Cancellation policy: Cancellations must be made at least 24 hours prior to the first night's stay. Otherwise, one night will be charged to your credit card.

Please send this reservation form via fax or email to:

27 Ly Thuong Kiet Street, Hanoi Vietnam Tel: +84-4-8253315 Fax: +84-4-8269818 Email: kshoabinh@hn.vnn.vn