**** IMID 2020 Reservation Request Form

1. Guest Information.

|  |  |
| --- | --- |
| Name(Surname & First name) |  |
| Address |  |
| Tel |  | Fax |  |
| E-mail |  |

2. Hotel Booking Details.

|  |  |  |  |
| --- | --- | --- | --- |
| Check in Date |  |  |  |
| Check out Date |  | Number of Room |  |
| Number of Nights |  | Number of Person |  |

|  |
| --- |
| Room Type and Rate |
| Superior RoomPremier RoomBreakfast - for one person - for two personSmoking (Only superior grade only) | ₩ 99,000 ( Double Bed ❒, Twin Bed ❒ )₩ 119,000 ( Double Bed ❒, Twin Bed ❒ )₩ 12,000 ❒₩ 24,000 ❒Smoking ❒ , Non Smoking ❒  |

Check in time – 3:00 PM, Check out time – 12:00 PM

3. Payment Guarantee.

Please charge to my □ VISA □ Master □ AMEX □ Other

Card number Expiry date(mm/yyyy) /

Cardholder’s name(as it appears on the credit card)

Please attach copy of Cardholder’s Credit Card front and rear side

4. Cancellation Policy

Cancellations MUST be send to the Hotel by E-mail or Fax

Cancellations made less than 2 days prior to arrival date will be subject to 1 night accommodation charge.

**I have read and understood the cancellation policies and wish to confirm my Hotel reservation**

Date : Name : Signature :

Please return form to E-mail : rsreservation@ramid.co.kr or Fax : +82 2 6202 2059

Reservation Department Tel : +82 2 6202 2000

Address : 410 Bongeunsa-ro, Gangnam-gu, Seoul, KOREA 06153

Sales Manager Contact : Seunghyeon Yang, rssales4@ramid.co.kr