



A L L S O N

HOTEL

SINGAPORE

**EVERY NATION CHURCH SINGAPORE
(12–16 October 2009)
RESERVATION FORM**

To : Adeline Lee Sales Manager From: _____
Company: _____

Email : allson.sales@pacific.net.sg Email : _____

Fax : (65) 6334 0630 Fax : _____

Tel : (65) 64311845 Tel : _____

___ New Booking ___ Amendment ___ Cancellation

Guest's Information

Prof/Dr/Mr/Mrs/Ms	_____	_____
	Last Name	Given Name

Reservations Requirements

Executive room category					
___	Single at S\$130.00nett per night (room with free internet)				
___	Breakfast at S\$15.00nett per person/day				
All rates nett inclusive of 10% Service charge and prevailing taxes					
___	Smoking	___	Non-Smoking	___	No preference
Arrival	_____	_____	_____	_____	_____
	Date	Flight Number	ETA		
Departure	_____	_____	_____	_____	_____
	Date	Flight Number	ETD		

Credit Card Details

All reservations must be guaranteed by credit card. Notice of cancellation must be received no later than 7 days prior to arrival date to avoid a cancellation/no show charge for the whole duration of stay booked.	
Credit Card _____	Expiry Date _____
Card Holder's Name _____	Signature _____

Reply from Allson Hotel Singapore

Confirmation number: _____
