



Hotel Reservation Form

iSTEM-Ed 2017

1. Personal information :

Name: _____ Last name _____

Name: _____ Last name _____

Contact Address: _____

E-mail Address: _____ Telephone: _____

2. Reservation:

The Empress Hotel Chiang Mai

Superior room 1,400 (Single)/Night/Room 1,600 (Twin)/Night/Room 800 Extra Bed

Deluxe room 1,900 (Single)/Night/Room 2,100 (Twin)/Night/Room 800 Extra Bed

The Park Hotel Chiang Mai

Superior room 1,200 (Single/Twin)/Night/Room 600 Extra Bed

Check-In Date: _____ Check-Out Date: _____

Arriving By: _____ Flight No. _____ Time _____

Airport pick up 100 THB/person number of passenger _____

3. Reservation Condition :

- 3.1 Reservation will be accepted only until June 15, 2017. After this date reservation will be subjected to room availability
- 3.2 Reservation must be guaranteed with Credit Card or Cash.
- 3.3 No Show or Late arrival will be charged as per reservation.
- 3.4 Cancellation made after July 5, 2017 will be charged for the whole period of reservation.
- 3.5 Please kindly fax or email this form back to the hotel.

Reservation at The Empress Hotel, Chiang Mai

Tel: 053 253 199 Fax: 053 279 956

E-mail : emprsvn@empresshotels.com

Website: www.empresshotels.com

Reservation at The Park Hotel, Chiang Mai

Tel: 053 280 080 Fax: 053 279 979

E-mail: rsvnpark@empresshotels.com

Website: www.empresshotels.com

For hotel use only Confirmed By _____

Date _____