



RESERVATION FORM

New Booking

Amendment

Cancellation

CONFIRMATION NUMBER : _____ DATE: _____

ARRIVAL DATE/FLIGHT DETAILS: _____ DEPARTURE DATE: _____

ROOM TYPES	#ROOMS	RATES
DELUXE (QUEEN/KING)		S\$148.00 ++
EXECUTIVE (KING)		S\$168.00 ++
BIGstar SUITE (KING)		
BIGshot SUITE (KING)		

* Room rates inclusive of 1 breakfast & Wi-Fi Internet access ONLY

* Additional breakfast can be purchased at SGD15.00NETT per person

* Bookings must be made direct with BIG Hotel via reservations@bighotel.com

COMPANY NAME/EVENT: REDDOT RUBY CONFERENCE 26 -27 JUNE 2014 @ Matrix (Biopolis), Singapore

GUEST NAME: _____

BILLING INSTRUCTION

UNDER COMPANY ACCOUNT: UNDER PERSONAL ACCOUNT:

ROOM CHARGES ONLY

ALL CHARGES

CREDIT CARD VISA MASTERCARD AMEX

OTHERS/PLEASE SPECIFY _____

CREDIT CARD NUMBER : _____ EXPIRY & CCV _____

Declaration:

I, _____, hereby authorise "BIG Hotel (Singapore) Pte Ltd" to charge to my Credit Card based on the information given by me as the Card Holder for above mentioned. *

**For third party credit card payment, please enclose a copy of the front & back of the credit card for verification purposes.*

Agreed & Accepted by Credit Card Holder
Card-holder's Signature (as per signature on your card)

Terms & Conditions

1. Room rate is subject to 10% service charge and 7% GST.
2. This booking will be cancelled if the credit card provided is invalid.
3. No charges will be imposed for cancellations or amendments to bookings made at least three (3) days prior to check-in date.
4. A sum of one (1) night's room rate stated in this confirmation will be charged if:
 - i. The booking is cancelled or amended within three (3) days of check-in date.
 - ii. The guest does not check in by 5:00 pm on check-in date or the agreed late check-in time.
 - iii. Amendments are made to the check-out date after the guest has checked-in.
5. Late check-out after 12:00 noon is chargeable at half the room rate; check-out after 6:00 pm is chargeable at one (1) night's room rate.

FOR OFFICIAL USE ONLY - AUTHORISED DEPARTMENT	
Officer-In-Charge: _____	Date/Time: _____
Approval Code : _____	Remarks: _____