|  |  |  |  |
| --- | --- | --- | --- |
| Hotel Reservation Form  (Block Code: GN20231105) | | | |
| All reservations are subject to confirmation by the hotel. Kindly email your completed booking form to reservation.beijing@wandahotels.com before **6 Nov, 2023**. Any booking received after this due date will be subject to availability. If you have not received a confirmation via fax or email within 48 hours of sending this form, please send an email to reservation.beijing@wandahotels.com and cc to [david.tang@wandahotels.com](mailto:david.tang@wandahotels.com) or call us by + (86) 10 8868 1188.  The Wanda Realm Beijing will send a confirmation upon receipt of this completed form. | | | |
| Last name: | | First name: | |
| Mobile: | | E-mail: | |
| Company: | | Nationality: | |
| **Room preference: (\*All non-smoking rooms)** | | | |
| Executive Deluxe Room – KING Bed Room (CNY 950 ) | | | |
| All above rates are per room per night.  All above rates are inclusive of one daily buffet breakfast for single occupancy, and two daily buffet breakfasts for double occupancies.  All above rates are inclusive of 10% service charge and 6% VAT.  All above rates are applied from **Nov 5th to Nov 10th, 2023** based on room availability. | | | |
| **Travel details:** | | | |
| Arrival Date: | Flight number: | | Arrival time: |
| Departure Date: | Flight number: | | Departure time: |
| CHECK-IN TIME is 2:00pm. To guarantee early check-in, please book one night prior to arrival.  CHECK-OUT TIME is 12:00noon. Extended use of guest room till 6:00pm on day of departure is subject to a half day’s rate. Thereafter, is subject to a full day’s rate. | | | |
| **Cancellation Policy**  - Reservation must be guaranteed by credit card  - Please offer your own credit card to guarantee your booking  - Please note that a cancellation fee will be assessed if you cancel the booking:   * Any cancellation of guest room within 7 days prior to first arrival (Oct 30th, 2023) will be subject to one day room charge. | | | |
| American Express  Dinners Club  Master Card  Visa  Others | | | |
| Credit Card Number: | | Expiry Date: | |
| Card Member’s Name: | | Signature: | |
| ***Special requests:*** | | | |
| Please indicate any special requests or more information concerning your booking | | | |