



**HOTEL RESERVATION FORM
RED DOT RUBY CONFERENCE 2015
04- 05 JUNE 2015 @ BIOPOLIS MATRIX**

Please return this hotel reservation form to:
BIG HOTEL SINGAPORE - RESERVATIONS DEPARTMENT
Tel: (65) 6809 7998 Fax: (65) 6809 7950
Email: reservations@bighotel.com

New Booking

Amendment

Cancellation

ROOM CATEGORY

Please tick your choice (s) of room type (s):

#ROOMS	ROOM TYPES (SINGLE / DOUBLE)	ROOM RATES
	Superior Room (Queen/King)	\$S\$158.00 ++ (\$S\$185.97Nett) Inclusive of daily breakfast & Wi-Fi Internet access per room per night
	Deluxe Room (Queen/King)	\$S\$168.00 ++ (\$S\$197.74Nett) Inclusive of daily breakfast & Wi-Fi Internet access per room per night

GUEST NAME:

(MR/MS/MRS/DR/PROF (Please underline Surname))

ARRIVAL DATE: _____

ARRIVAL FLIGHT/TIME: _____

COMPANY: _____

TELEPHONE: (including country code) _____

DEPARTURE DATE: _____

DEPARTURE FLIGHT/TIME: _____

COUNTRY OF RESIDENCE: _____

E-MAIL ADDRESS: _____

CREDIT CARD GUARANTEE

MASTERCARD

AMEX

VISA

JCB

CUP

CARDHOLDER'S NAME: _____

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.

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: _____

Confirmation Number: _____

Date/Time: _____

Remarks: _____