

RESERVATION FORM

E-mail : info@citichichotel.com

Please fax or e-mail this form to :

www.citichichotel.com

Guest name : First Name : (Mr./Mrs./Ms.) _____

Last Name : _____

Contact Tel. : _____ Fax : _____ E-mail : _____

Hotel Reservation : Arrival Date : _____

Departure Date : _____

Room Type : Deluxe 2,200 THB per room per night with breakfast.

Deluxe 2,000 THB per room per night room only.

No. of room : _____ room (s)

No. of Guest : _____ person (Adult _____ person, Child _____ person)

Special request : _____

Payment : Own Account (Pay by cash or credit card upon checking out)

Credit card type : _____

Credit card No : _____ Expiry Date : _____

*Your credit card number is just for guarantee the reservation. We will be charge when you checking out or no show only.

Should you have any queries or require further information, please feel free to contact us at your earliest convenience.

Thank you very much for your reservation, we are looking forward to welcome you at CitiChic Hotel

Date : _____ Signature : _____