CROWNE PLAZA SHANGHAI RESERVATION FORM



	orm to <u>Ms. Stella Sun a</u> <i>hotel room <u>DIRECTLY</u></i>		<u>es@cpsha.com</u> before 1 st Oct, 2014 LAZA SHANGHAI)
Mr/Mrs/Ms – Surname:		First Name:	
Title/ Company:			
Tel:	Fax:	Em	nail:
Accommodation:			
Arrival / Check-in Date:		Flight / ETA :	
Departure / Check-out Date:		Flight / ETD : _	
Request Late Check-in (pleas Request Late Check-out (plea	e tick $$): Time se tick $$): Time	e::::	(will be approved by hotel) (will be approved by hotel)
CHECK-IN TIME IS 14:00 a, CHECK-OUT TIME IS 12:00 Thereafter, a full day's room Reservations will be held till regardless of arrival time and) noon. Extended use of t rate will be applicable. 6pm only, unless guaram	rooms till 6:00 pm t teed with Credit Co	is subject to half day's rate. ard. Guaranteed reservations will be held
Room Preference (Please ti Smoking / No		Double be	ds / King size bed
Deluxe Room – Mair Club Room – Main B Premier Room - New *Above room rate inclusive a Special request for room:	Building (<i>Special rate</i> uilding (<i>Special rate Cl</i> Wing (<i>Special rate CN</i> internet	CNY900.00net in NY1100.00net in NY1200.00net incl	inclusive of one buffet breakfast) nclusive of one buffet breakfast) clusive of one buffet breakfast) lusive of one buffet breakfast)
	companied by first nigh	t stay prepayment e	llability. either by credit card or bank transfer to " Cr of your credit card with signature.
			Master CardOthers
Credit Card Number	Expiry Date	Cardhold	der's signature
from my credit card if I fail room and incidental expens For hotel use only	to arrive (no-show) or	cancel the room r eck-out.	ax and service charge, which will be dedu reservation. Registering with the Hotel an
Confirmed by Confirmation number		Date	
	400 Pan Yu Road	MWNE PLAZA SH 1, Shanghai 20005. 8888 Fax: (86-2	2,P.R. China

Website : www.shanghai.crowneplaza.com