



**PARK HOTEL**  
HONG KONG

**Joint International Symposium on Deformation Monitoring**  
**Hong Kong Polytechnic University**  
**01-04 November, 2011**

To : Park Hotel, Hong Kong – Ms Rimsky Liu (Account Manager)  
61-65 Chatham Road South, Tsimshatsui, Kowloon, H.K

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"New Rooms New Face, **PARK HOTEL** is ready for your stay" a newly renovated guest's room with refreshingly modern design. Simple elegance combined with spacious and attentive services. Park Hotel's prime location in Tsimshatsui, just only 5 minutes walking distance to the MTR (Subway) and the Star Ferry Pier to Hong Kong Island and the China Ferry Terminal to major coastal ports is just a short walk away. Furthermore, it only takes you 10 minutes from the Kowloon Station (Airport Express Trains).

Please kindly complete this form and return by fax or email on or before 30<sup>th</sup> September, 2011.

< **ROOM RATE** >

**1. Superior Room (Single / Double Occupancy)**

- ( ) HK\$1,250.00 - Room only
- ( ) HK\$1,350.00 - Room includes buffet breakfast for 1 person
- ( ) HK\$1,450.00 - Room includes buffet breakfast for 2 persons

**2. Deluxe Room (Single / Double Occupancy)**

- ( ) HK\$1,450.00 - Room only
- ( ) HK\$1,550.00 - Room includes buffet breakfast for 1 person
- ( ) HK\$1,650.00 - Room includes buffet breakfast for 2 persons

\*\*\* The above rates are subject to 10% service charge only and applicable to single/double occupancy per room basis.

< **AIRPORT SHUTTLE** >

**Shuttle Bus - HK\$130 per person** ( ) Arrival ( ) Departure

\*Airport Shuttle Service is provided based on a fixed time schedule. (Please approach B12 counter in HK Airport)

< **GUEST INFORMATION** >

1) Guest Name: (Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (Mr./Mrs./Ms)

2) Guest Name: (Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (Mr./Mrs./Ms)

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_ Email: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Arrival Flight / Time: \_\_\_\_\_

No. of rooms: \_\_\_\_\_ ( Single / Double Occupancy)

Room Preference: 1) Queen / Twin Bed 2) Smoking / Non-Smoking

(Subject to hotel availability and final hotel confirmation)

Booking Guaranteed by: ( ) Amex ( ) Visa ( ) Master ( ) Diner

Name on Credit Card: \_\_\_\_\_

Card Number with expiry date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Remarks:**

- All reservations must be guaranteed by one night room rate deposit or a major credit card. All non-guaranteed reservations will be released after 16:00 hours on the date of scheduled arrival. Thereafter, rooms are subject to availability.
- Once guaranteed, one night room charge will be debited on the given credit card in the event of "no show" or amended / cancelled reservation made less than 3 days prior to the guest's date of arrival. Should guest with a guaranteed reservation not arrive on the scheduled date of arrival, the room will be released for resale.
- Kindly resend this form to us if you do not receive our confirmation within 48 hours.
- Payment Method: All guests must settle all payments by cash or credit card upon departure. **NO** credit facility and credit card 3<sup>rd</sup> party for payment is allowed.

**HOTEL USE ONLY**

**Confirmation No:** \_\_\_\_\_

**Signed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_