

Reservation Form 2nd Myanmar Consumer Summit 27 – 28 October 2014

Please complete and fax/e-mail this form to:

PARKROYAL Yangon

33 Alan Pya Phaya Road Dagon Township Yangon-Myanmar

Phone: +95 1 250388 Fax: +95 1 252476

Yin Yin (Reservations Supervisor), Angela Yi Yi Maw (Reservations Manager)

Brad Aung Myat Htet (Senior Sales Manager)

E-mail: reserve.prygn@parkroyalhotels.com; yiyimaw.angela@parkroyalhotels.com

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Full Name:				Title:	Mr. □	Mrs. □	Ms. □		
Phone:				Fax:					
Room Informatio	n (Subjected	to 10% Service Char	ge & 5% Govern	ment T	ax)				
□ Deluxe Single R	-	: USD 195++ per (-						
□ Deluxe Double		: USD 215++ per (• •		-				
□ Premier Single		: USD 220++ per (, ,		•				
□ Premier Double									
□ Orchid Club Sin	Orchid Club Single Room : USD 255++ per day (including buffet breakfast)								
□ Orchid Club Double Room : USD 275++ per day (including buffet breakfast)									
	of 20th Octob	e been reserved for er 2014. Any reques							
Check in Date:		Check o	ut Date	:					
Room Request:				ber of person/s per room: Single / Twin / Double					
US\$ 35 nett /way USD 40 nett/ way	by Limousine by Limousine	(2 guests)			Yes Yes Yes				
Arrivai Date:									
Flight No:			Time:						
Departure Date:									
Flight No:			Time:						
Payment Method USD Cash / Visa of Beneficiary Name Account No Bank Details Bank Address	or Master Card : YIPL Investm : 501 024657 : OCBC Bank			unt be	ore guest ar	rival.			

Note: Please do not mention PARKROYAL Yangon, Myanmar

: OCBCSGSG

Signature:

Swift Code