

Attention: \_\_\_\_\_ Date: \_\_\_\_\_

From: \_\_\_\_\_ Contact Tel No. : \_\_\_\_\_

**Re:**
**Booking Details:**

Name: \_\_\_\_\_

Check-In Date: \_\_\_\_\_ Check-Out Date: \_\_\_\_\_

No. of Room/s: \_\_\_\_\_ Contact Tel No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Contact Fax No.: \_\_\_\_\_

**ROOM CATEGORY (SINGLE/TWIN) – Perinatal Society of Malaysia Congress 17-20 March 2011**
☐ **Standard Room**  
 RM200.00 nett with 02 breakfast

☐ **Family Room**  
 RM400.00 nett with 04 breakfast

☐ **Superior Hillview Room**  
 RM230.00 nett with 02 breakfast

☐ **Seafacing Suite**  
 RM470.00 nett with 02 breakfast

☐ **Deluxe Side Seaview**  
 RM270.00 nett with 02 breakfast

☐ **Extra Bed with Breakfast**  
 RM90.00 nett (Max. 01 unit per room)

*Please tick your choice of room*
**Terms & Conditions**

1. A one (01) night room charge will be imposed in the event of NO SHOW on date of arrival and/or CANCELLATION less than 07 days notice prior to date of arrival.
2. All room request i.e. connecting room, adjoining room, king size bed, etc. is subject to availability on date of arrival.
3. Rooms categories are based on first come first serve basis. Please kindly make your reservations as soon as possible as all room reservations must be GUARANTEED.
4. Please kindly fill up the portion below advising us of your payment method latest by \_\_\_\_\_, failing which, the reservation will be automatically released.

**Payment Method**
☐ Local Order      ☐ Cheque / Cash      ☐ Credit Card

Via Credit Card

 I, \_\_\_\_\_, NRIC No. \_\_\_\_\_,  
 hereby authorise Bayview Beach Resort to charge to my credit card the sum of RM \_\_\_\_\_ as room deposit  
 (guarantee) for room/s booking above.

Credit card No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Card Type: American Express / Diners Club / Master Card / Visa (Please circle)

Card Holders Signature: \_\_\_\_\_

**Bank Details:**
**Beneficiary:** Bayview Beach Resort  
**Bank:** Malayan Banking Berhad  
**Account No.:** 0-07143-406677