2012 EASTICA Seminar & Executive Board Meeting

17(Mon) ~ 20(Fri) July, 2012
General Archival Authority, Ulaanbaatar, Mongolia

HOTEL RESERVATION FORM

Please typewrite and send this form by facsimile or email no later than June. 01, 2012 **to:**
Mrs Uyanga Bold, Foreign Relation officer of GAAM
Tel: +976-51-264846 Fax: +976-51-262351 **E-mail: archive@mongol.net**

1. Participants (Please type or print legibly)

Title	☐Mr. ☐Mrs. ☐Prof. ☐Dr. ☐Other.		
Name	(Given Name) (Surname) (Middle Name) (Chinese characters, if any)		
Nationality		Passport Number	
Country/Region		Position	
Telephone		Work Address	
Fax		E-mail	
Arrival Date		Flight No /Time:	
Departue Date		Flight No /Time:	

2. Hotel & Room requirements (Please mark your choice)

☐ **Kempinski Hotel Khan Palace**

Room type	Price (Per room)	Period of stay	Person to share
☐ Superior /single/	$210	Check-in Date: Check-out Date: Night(s):	Family Name: Given Name: Middle Name:
☐ Superior /twin/	$240		

*All rates are includes Breakfast and 10% VAT and Internet use.
*Check in time 13:00 and check out time is 12.00 am

☐ **Chinggis Khaan Hotel**

Room type	Price (Per room)	Period of stay	Person to share
☐ Standard /single/	$150	Check-in Date: Check-out Date: Night(s):	Family Name: Given Name: Middle Name:
☐ Standard /twin/	$175		

*The room rate includes buffet breakfast, fitness center, internet 24 hours and 10% VAT.
*Check-in time is 13:00 and check-out time is 12:00 pm.

3. Payment Guarantee (Please check the blank, type or print legibly with the signature)

Credit Card Type	☐ VISA ☐Master Card ☐AMEX	
Card Number	☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐	Expiration Date (mm/yy):
Card Holder's Name: (as it appears on the Credit Card)		Signature:

*Note: A deposit of one night's stay is required to guarantee your reservation. For this purpose, please give us your credit card information. All hotel expenses deducted from the deposit should be paid directly to the hotel.

☐ I will pay it in advance by bank transfer. (Please note that remittance charges should be borne by the applicant)

Date: _____   Signature: _____