



Colombo City Hotels (P r i v a t e) L i m i t e d

**APNIC 42 Conference
28 September - 5 October 2016**

Accommodation Booking Form

Please complete this form and send it back to cmb_cityhotels@sltnet.lk

Guest Information

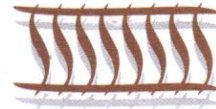
Guest Name	First Name :
	Last Name :
Nationality	
Organisation	
Contact Details	Phone:
	Email:
Check in Date	
Check out Date	
Number of Rooms	
Room Type (Special offer only for APNIC 42)	9620.00 LKR or 65US \$ nett per night Single occupancy
	11248.00 LKR or 76us \$ nett per night Deluxe Double occupancy
Please Indicate Room Preference	<input type="checkbox"/> Non smoking room
	<input type="checkbox"/> Smoking room
Special Request	

Credit Card Guarantee

Card Type	
Name on the Card	
Card Number	
Expiry Date	
CVV No	

No. 33, Canal Row, Fort, Colombo 01.

Tel.: +9411 5341962-63, +9411 5341965-66 Fax : +9411 2432480
E-mail : cmb_cityhotels@sltnet.lk Web : www.colombocityhotel.com



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Terms and conditions:

- Check in time is from 14:00 hrs and check out time is by 11:00 hrs For early check in and/or late check out, rooms are subject to availability or additional fee may apply.
- The above rates quoted is inclusive of Government Tax and Service charge.
- Complimentary Daily buffet breakfast
- Complimentary 24hours in room Wifi Internet access
- Complimentary Coffee Tea making facilities in the Room
- Complimentary 02 Bottle of Mineral Water in the room daily.
- Credit card guarantee must accompany your reservation request, your credit card will not be charged for your advance deposit. However card will be charged for late cancellation fees and no-shows, if applicable.
- There are limited guest rooms reserved at this special rate(s) for APNIC delegates. Reservation is on first come first serve basis.

Cancellation Policy:

- Cancel the booking 03 working days before the check in date no penalty apply
- No-show reservation will be charged full length of stay

I agreed to the terms & conditions provided by above mentioned company and submit this form as the confirmation of payment.

Thank you.

(Signature as per credit card)

Name:

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