

HOTEL RESERVATION FORM
SIBCON CONFERENCE AND EXHIBITION 2024
Tuesday, 8 October to Thursday, 10 October 2024

To: Group Reservations
 Email: groups@rwsentosa.com

Address: 8 Sentosa Gateway, Singapore 098269

To: Catherine Koh / Sales
 Email: catherine.koh@RWSentosa.com

*If you are arriving between midnight and the official check-in time, please make the reservation one day prior to the date of arrival.

Hotel	Room Category	Room Rates - Low		Room Rates - Peak		Room Preference (Subject to availability) Please circle -
		Room Inclusive of one breakfast	Room Inclusive of two breakfast	Room Inclusive of one breakfast	Room Inclusive of two breakfast	
Hotel Michael	Deluxe Room	S\$390.00++ per room per night	S\$415.00++ per room per night	S\$490.00++ per room per night	S\$515.00++ per room per night	King / Twin (Non Smoking)
Hotel Ora	Deluxe Room	S\$440.00++ per room per night	S\$465.00++ per room per night	S\$540.00++ per room per night	S\$565.00++ per room per night	King / Twin (Non Smoking)

NOTES:

- **LOW:** Applicable for check-in from Sundays to Thursdays only
- **PEAK:** Applicable for check-in on *Fridays, Saturdays, MOE school holidays, eve of Public Holidays and Public Holidays*
- Additional breakfast is available at S\$25.00++ per adult per day and S\$12.50++ per child per day
- Additional charge of S\$100.00++ per adult per night for the 3rd occupant
- The maximum number of guests allowed in a room is 3 adults or 2 adults and 2 children
- All rates quoted are in Singapore Dollars and are subject to 10% service charge ("Service Charge") and prevailing goods & services ("GST")

Terms & Conditions

- The rate quoted above is valid for stay period of **8 to 10 October 2024** and applicable for bookings made by **9 September 2024**.
- Room rate and room category are subject to availability and changes.
- All reservations are subject to rooms' availability at the time of the reservation; Bed type request is subject to availability upon check in.
- In the event that the above mentioned rate is not available at the time of the reservation, best available rate will be quoted
- A credit card number is required to confirm and guarantee the reservation
- Official check in: after 1500 hrs / Check out: before 1100 hrs
- All late check-outs are subject to availability and the applicable room rates. Late check-out after 11:00am and before 6pm will be charged at 50% of the applicable room rate for one (1) night. Check-out after 6:00pm will be charged at 100% of the applicable room rate for one (1) night.
- Pre / Post dates will be based on Best Available Rates
- Early Departure Policy: Guests who shorten their stay before their original scheduled departure date will be charged full stay room charge.
- All cancellations or changes must be made by writing via email (groups@rwsentosa.com) **at least 72 hours** prior to arrival date or no-show will be subjected to a full stay room charge which will be automatically debited from guest's credit card given in this form.

I have read and understood the terms and conditions listed above.

 Name & Signature

 Date

Resorts World at Sentosa Pte Ltd
 8 Sentosa Gateway
 Singapore 098269
www.rwsentosa.com

Co Reg No: 200502573D

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Personal data consent

By proceeding to submit the provided information in this form, I agree that Resorts World Sentosa ("RWS") may collect, use and disclose my personal data, for the purposes set out below and in the RWS Personal Data protection statement

- i.To process my product booking and payment
- ii.To provide notification for my product booking confirmation via RWS's authorized service provider

Guest Information

Salutation: Prof / Dr / Mr / Mrs / Ms Nationality: _____

Family / Last Name: _____ Given / First Name: _____

Tel: _____ Email address: _____

Accompanying Person's name (If Any) _____

Arrival Date: _____ Flight Number/ Arrival Time: _____
*official check-in time is after 1500 hrs

Departure Date: _____ Flight Number/ Departure Time: _____
*official check-out time is prior 1100 hrs

Room Guarantee

Please guarantee to my credit card: **VISA / MASTER / AMEX**

Credit Card Number _____

Card holders name _____

Expiry Date [MM] [YYYY] Card _____
Signature as appeared on _____