



EXCLUSIVE FOR PDC Asian Tour 2018 MEMBERS ONLY

RESERVATION REQUEST FORM

For Room booking : (please email or fax to Reservations Dept at 603 5521 9029 / reservations@bestwestern-icity.my)

Guest Name : _____
 Sharing with (if applicable) : _____
 Number of Adults : _____ Children : _____
 Company Name : _____
 Caller Name : _____ H/P : _____
 Tel : _____ Fax : _____
 Sffla membership No. : _____ Email : _____
 Arrival Date : _____ Departure Date : _____
 Flight / ETA : _____ Flight / ETD : _____

Room Type	No. of Rooms		
	Single	Double	
	Rate per Room in RM		
Superior	190Nett	190Nett	
Deluxe	230Nett	230Nett	
i-Suite	350Nett	350Nett	

Special Request : Please tick (X)

Double Bed Twin Bed
 Connecting Adjacent
 Smoking Non Smoking

Billing Instructions : _____

Personal Account

Requested by :

 Name:
 Date:
 Company Stamp:

 Name:
 Date:
 Company Stamp:

OFFICE USE ONLY

Acknowledge Receipt / Confirmed by : _____
 Room Accommodation Confirmation No : _____
 Name : _____
 Department : _____



EXCLUSIVE FOR PDC Asian Tour 2018 MEMBERS ONLY

RESERVATION REQUEST FORM (予約申込みフォーム)

For Room booking : (please email or fax to Reservations Dept at 603 5521 9029 / reservations@bestwestern-icity.my)

Guest Name (名前) : ICHIRO TANAKA
 Sharing with (if applicable) (同室者: いる場合) : _____
 Number of Adults (人数 (大人)) : 1 Children : _____
 Company Name (会社名) : _____
 Caller Name : _____ H/P (携帯電話) : +81 90 1234 5678
 Tel (電話) : _____ Fax : _____
 Sffla membership No. : _____ Email (メールアドレス) : ichiro@gmail.com
 Arrival Date (到着日) : 16 / Aug / 2018 Departure Date (出発日) : 19 / Aug / 2018
 Flight / ETA (到着便名: 到着予定時刻) : JL123 15:00 Flight / ETD (出発便名: 出発予定時刻) : JL234 13:00

Room Type	No. of Rooms		Rate per Room in RM
	Single	Double	
Superior	190Nett ✓	190Nett	
Deluxe	230Nett	230Nett	
i-Suite	350Nett	350Nett	

Special Request : Please tick (X)
 (特別要請: 必要な場合はXで記入して下さい)

Double Bed (ベッド1つ) Twin Bed (ベッド2つ)
 _____ it
 Smoking (喫煙) Non Smoking (禁煙)

Billing Instructions (支払い情報)

Personal Account by Creditcard (Ichiro Tanaka が個人でクレジットカードで支払います)
 by Cash (Ichiro Tanaka が個人で現金で支払います)

Requested by :

Name: _____
 Date: _____
 Company Stamp: _____

Name: _____
 Date: _____
 Company Stamp: _____

OFFICE USE ONLY

Acknowledge Receipt / Confirmed by : _____
 Room Accommodation Confirmation No : _____
 Name : _____
 Department : _____