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**Reservation Form**

**ICCAS 2016**

**제어로봇시스템학회**

\* Please complete this form with all requested information and send it to the hotel directly by e-mail or fax.

E-mail : [**swissrosen@gmail.com**](mailto:swissrosen@gmail.com) Fax : +**82-54-748-1998** (Tel +82-54-748-4848).

We recommend you to make a reservation by 6 October 2016 to take an advantage of the special room rate.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | | | | | |
| **FIRST NAME** | |  | | **LAST NAME** | | |  | |
| **GENDER** | | Female □ / Male □ | | **NATIONALITY** | | |  | |
| **PHONE** | |  | | **E-MAIL** | | |  | |
| **CHECK-IN** | |  | | **CHECK-OUT** | | |  | |
| **NUMBER OF ROOMS** | |  | | **NUMBER OF NIGHTS** | | |  | |
| **ROOM TYPE & RATE** | | | | | | | | |
| DOUBLE | | □ KRW 78,000 | | | **• Breakfast ( 07:30 ~ 09:00)**  **: KRW 10,000 / 1 person**  □ YES (PAX.: )  □ NO | | | |
| TWIN | | □ KRW 88,000 | | |
| SUITE | | □ KRW 140,000 | | |

• Above rates are inclusive of 10% VAT.

• Extra charge above 2 people is **KRW15,000** per person per night.

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| **PAYMENT** | | | |
| **CARD TYPE** | □ VISA □ MasterCard □ BC □ American Express □ Others | | |
| **CARD NUMBER** |  | | |
| **CARD HOLDER NAME** |  | **EXPIRY DATE** | (MM/YY) |

* **Cancellation Policy**

Cancellation made before 5~7 days prior to arrival : 10% of the total paying.

Cancellation made before 3~5 days prior to arrival : 30% of the total paying.

Cancellation made before 1~2 days prior to arrival : 50% of the total paying.

Cancellation made on arrival day or No Show : 100% of the total paying.