**\*Please Fill out this form and return this form us by email.**

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| --- |
| **1. PERSONAL INFORMATION** |
| Guest NameFirst Name Last Name Room Shared withFirst Name Last Name  |  □ Prof. □ Dr. □ Mr. □ Ms. |
| Company / Organization :  |
| Address :  |
| Work Phone : Cellular Phone :  |
| E-mail :  |

**2. HOTEL ROOM RESERVATION**

|  |  |
| --- | --- |
| Arrival (Check-in 14:00) :  | No. of Guest :  |
| Departure(Check-out 12:00) :  | No. of Nights :  |
| Room Type | □ Deluxe Triple(3 Single Bed) KRW 174,000□ Deluxe Twin(Double +Single Bed Each) KRW 156,000□ Ondol(Korean Style) KRW 156,000□ Single Use(All Type) KRW 138,000 |
| √ All rates are including service charge & Tax√ Room rates are included breakfast (Triple-3Pax, Twin&Ondol-2Pax, Single Use-1Pax)) |

**3. RESERVATION GUARANTEE AND CANCELLATION CHARGE**

|  |
| --- |
| Credit Card □ Visa □Master □ DinersClub □ AMEX □ JCB □ other( ) |
| Card Number  |
| Expiration Date(Month/Year) /  |
| Name of Card Holder  |
| Cancellation Charge : If you cancel your reservation by 3days prior to arrival, there will be no penalty. However, within 3days, one night deposit as a penalty will be one day room charge. |

**4. AUTHORIZED SIGNATURE**

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