

## HOTEL RESERVATION REQUEST

Reservation Dept.    Tel. +82 2 559 7777    Fax. +82 2 559 7896    e-mail. [ic-convention@parnas.co.kr](mailto:ic-convention@parnas.co.kr)

◆ Please complete this form and return directly by fax or email to us **no later than April 5, 2019** to ensure room availability and group rate.

### 1. PARTICIPANT INFORMATION

Title : <input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr.	
Last Name :	First Name :
Company Name:	Email :
Address :	Country :
Phone No. :	Fax No. :

### 2. HOTEL RESERVATION

Hotel : <b>InterContinental Seoul COEX</b>	
Check-in Date :	Check-out Date :
Room Type :	<input checked="" type="checkbox"/> KRW230,000
Superior Room	
Smoking Preference :	<input type="checkbox"/> Non-Smoking <input type="checkbox"/> Smoking
No. of Guest :	Accompany Name :
Flight No. :	Arrival Time :

*\*Above room rates are quoted in Korean Won.*

*\*Above rates are based on no double occupancy charge.*

*\*Above rates are exclusive of breakfast. Special breakfast rate is offered at KRW30,000 subject to 21 % of service charge and cumulative government room tax per person.*

*\* Above room rates are inclusive of in-room internet.*

*\*Above room rates are exclusive of 21 % of service charge and cumulative government room tax.*

*\*Above room rates are invalid to save IHG reward points.*

**\* Check-in time - 3:00 pm,    Check-out time - 12:00 noon.**

### 3. CREDIT CARD GUARANTEE

Credit Card : <input type="checkbox"/> Visa <input type="checkbox"/> Master <input type="checkbox"/> JCB <input type="checkbox"/> AMEX <input type="checkbox"/> Diners	
Card Number :	Expiry Date :
Card Holder :	Signature :

**\* Cancellation made after 7days prior to arrival including no-shows: Whole reserved nights' room charge including service charge & tax.**

### 4. SPECIAL REQUEST

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