



ROOM RESERVATION FORM

Faculty of Engineering and Technology (FET), Multimedia University International Conference of Space Aeronautics & Navigation 22nd – 24th October 2014 (Wednesday – Friday)

	n rooms will be subjected to availa		iiusi ieacii i	iolei al a IIII	IIIIIIuIII Z	1110111115
Name	Trooms will be subjected to availe	iomity.				
Address						
Fax No						
H/P No.						
Sharing person name)					
Promotion Room R A: 2 Days 1 Night S						
Room Types	Price Per Room	Value Added Breakfast Per Person	No. Of Person	No.of Rooms	C/In Date	C/Out Date
Premier	RM200+++ (RM234 nett)	RM25++ (RM 29 nett)	1 013011	Rooms	Date	Date
Executive Premier	RM250+++ (RM292 nett)	RM25++ (RM 29 nett)				
Club Single	RM400+++ (RM464 nett)	Inclusive Breakfast				
Club Twin/ Double	RM450+++ (RM524 nett)	Inclusive Breakfast				
B: 3 Days 2 Nights	, , , ,					
Room Types	Price Per Room	Value Added Breakfast Per Person	No. Of Person	No.of Rooms	C/In Date	C/Out Date
Premier	RM345+++ (RM402.20 nett)	RM50++ (RM 58 nett)				
Executive Premier	RM445+++ (RM518.20 nett)	RM50++ (RM 58 nett)				
Club Single	RM800+++ (RM930.00 nett)	Inclusive Breakfast				
Club Twin/ Double	RM900+++ (RM 1,046 nett)	Inclusive Breakfast				
 Terms & Conditions: Rates are quoted in Malaysia Ringgit(MYR). Rates quoted(+++) is subjected to 6% government tax, 10% service charge & Heritage Tax @ RM 2.00 Credit card details are required to guarantee the booking. In case of cancellation less than 14 Days prior to arrival or in case of no-show, one night stay per room will be charged to your credit card. Cancellation less than 3 days, a full duration of stay will be charged. Extra third person sharing room @ RM100++ with one breakfast Hotel reserves the right to cancel or modify reservations where it appears that a customer has engaged in fraudulent or inappropriate activity or under other circumstances where it appears that reservations contain or resulted from a mistake or error. This rate is not valid with other promotional offer or packages or discount. AUTHORIZATION OF PAYMENT						
Credit card type (please tick)	n (to be completed by cardholde		etails as follo	ws:		
Card Type:	Visa MC Amex Individual (personal credit card Corporate Company Name:		Discover	☐ JCB		
Credit Card No:		ID No.(last 3 digit on si	gnature pan	el)	Exp. Date	e:
	nt is mailed)					
Phone number:	Fax or altern	nate number :				

Please Fax/Email Hotel Reservation Form to:

RESERVATION DEPARTMENT, RAMADA PLAZA MELAKA

Tel No: +6-06-284 8888 Fax No: +6-06-2835351 / +6-06-2263895

Email: reservations@ramadaplazamelaka.com; christine.chua@ramadaplazamelaka.com