

## Communication, Medicine, and Ethics (COMET) The University of Hong Kong on 24 - 28 June 2015

Please complete this form and return to Ms. Angel Cheng, Senior Sales Manager, via email: <a href="mailto:angelcheng@yhk.com.hk">angelcheng@yhk.com.hk</a> or by fax: (852) 2845 6263 <a href="mailto:by 1 June 2015">by 1 June 2015</a>. Should you have any queries, please feel free to call (852) 3476 1591.

	HOTELR	ESERVATION FORM		
Surname:	Mr / Ms / Mrs First Name:			
Surname:	Mr / Ms / Mrs	First Name:		
Email:				
<b>Telephone:</b>		Fax:		
Arrival Date:		———— Flight / Tim	e:	/ hrs
Departure Date:		Flight / Tim	-	hrs
Room Rates				
No. of Room	Room Type	Daily Rates		
	Superior Double Bed Room	☐ HK\$900 (Room only	)	
		☐ HK\$985net with dail	y buffet breakfast	for <b>1 person</b>
		$\square$ HK\$1,070net with daily buffet breakfast for <b>2 persons</b>		
All rooms are non-s	will be subject to confirmation from		_	
Cancellation Polic				
	cancellation, a written notification	is required <b>21 day</b> s prior to	arrival date; oth	erwise a penalty
	tal room cost will be imposed into			
•	to the above credit card.			•
Guarantee reserva	ntion			
Type of Card:	☐ Visa Card	☐ MasterCard	☐ American	Express
Card number:			Expiry Date:	MM/YY
Name on Card:			<u>—</u>	
Cardholder's Sign	ature: X		(Same signatur	re on your card)
	All information is kept confidential and used only for the purposes as noted above.			
FOR HOTEL USE	E ONLY			
Confirm (Conf	irmation no	)	Confirm	