

SASIMI 2007 Hotel Reservation Form

Hotel Sapporo Garden Palace
North 1 West 6, Sapporo, 060-0001 Japan.
Fax: +81-11-251-2938 (Phone: +81-11-261-5311)

日本語がわかる方は、日本語で記入してください。
(Please fill out in English or Japanese.)

Title: Prof. Dr. Mr. Ms.

Last name: _____ First name _____

Affiliation: _____

Address: _____

City: _____ Postal (ZIP) code: _____ Country _____

Phone: _____

Fax: _____ (← mandatory)

Check in: Oct. _____, 2007 Time: _____ (Flight No: _____)

Check out: Oct. _____, 2007 Time: _____ (Flight No: _____)

Room preference (select one):

Single with breakfast 7,000 Yen / room / night

Single without breakfast 6,000 Yen / room / night

Twin with breakfast 13,000 Yen / room / night

Twin without breakfast 11,000 Yen / room / night

→ (Name of accompanied person: _____)

General conditions:

- Reservation should be made by fax directly to the hotel.

(Phone call will not be accepted.)

- The room will be allocated on a "first come, first served" basis.

- Confirmation will be returned by fax from the hotel in a few days.

- Bring the confirmation sheet and show it on your check in.

- The price includes taxes and service charges.

- Payment will be made at the hotel by cash or credit card. (MC/Visa/Amex/JCB)

..... (Don't write below)

Confirmation by the hotel:

Sorry, we have no vacancy at present.

Your room is reserved as your request.

Your Reservation ID: 2007SASIMI-_____

Name of receptionist: _____ Date: _____, 2007