**HAEUNDAE GRAND HOTEL RESERVATION FORM**

 **IEEE 2015\_ (October 30 ~ November 5 ,2015)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  **Mr. Ms.**  | **Last Name** |  | **First Name** |  |
| **Company** |  |
| **Address** |  |
| **Tel**  |  | **Fax** |  |
| **E-mail** |  | **Passport No.** |  |
| **Check-in** | **Date: Time:** | **Check-out** | **Date: Time:** |
| **Flight No.** |  | **Arrival Time** |  |

Following hotel rooms are available at special rates during Agenda for IEEE 2015. Should you wish to make reservation for your accommodation, please fill in details on this form and email or fax directly to Haeundae Grand Hotel.

**HOTEL**

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| **haeundeagrandhotel-Logo2**5 Star Hotel**Reservations:**Tel:+82 51 7400 114Fax:+82 51 7400 554  | **Haeundae Grand Hotel Busan (http://www.haeundaegrandhotel.com/main.asp)** 651-2, Woo-Dong, Haeundae-Gu, Busan 612-020, South Korea**⬜ City View:** KRW 157,300 /night **⬜** Double **⬜** Twin**⬜ Beach View:** KRW 193,600 /night **⬜** Double **⬜** Twin**⬜ Additional Breakfast:** 24,200 KRW\* The above rates are included 10% tax and 10% service charges.\* Free internet connection is included.\* Free swimming pool & fitness center(health club)is included. **\*** There will be charged 48,400 KRW for Friday and Saturday.  |

**Reservation Guarantee**

|  |  |
| --- | --- |
| Card Type |  **⬜** Amex **⬜** Diners **⬜** JCB **⬜** Master **⬜**  VISA |
| Card Holder’s Name: | Security Code (3 digits) |  |
| Card No. |  | Exp. Date |  MM/YY ( / ) |
| Signature |  | Date |  |

**Please send to:**

|  |  |
| --- | --- |
| **Reservation** | **Tel: +82-51-740-0114** Fax: +82-51-740-0554 E-mail: resv@haeundaegrandhotel.com  |

**Reservation Policy**

* Reservation should be accompanied with a credit card guarantee or one-night deposit by bank draft issued to the hotels. In the event of “no-show” or **cancellations with less than 7 days prior to arrival**, the hotel will levy a one-night charge. Room deposits and payments are the responsibility of the attendee and will be acknowledged directly by attendee. Guests are responsible for direct payment to the hotel for all charges including room, tax and personal incidentals. **Check in** time is 14:00 PM and **Check out** time is 12:00 PM.

Above Statement Confirmed by \_\_\_(PRINT YOUR NAME)\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Confirmed by Hotel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Confirmed Fax Returned On:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_