



RESERVATION FORM

FOOD & HOSPITALITY THAILAND 2025 QSNCC First Name: Last name:			Mr./Mrs./Ms./Dr./H.E.				PERIOD: 20-23 August 2025 E-Mail:		
riist name. Last name.			1VII./1VII.3./1VI3./DI./11.L.				L-IVIdII.		
Address:			Mobile Phone No.:						
Passport No.:			Nationality:						
Arrival Date: Arrival Flight to BKK:		Departi		ire Date:		С	Departure Flight:		
	SDECIAL DAT	TE DI IDINO	E EVENT	SHOW DAT	re	<u> </u>			
	SPECIAL RA	E DURING EVENT		Т		тот	AL		
Type of room	Room Rate	Occu	pants	Occu	pants	No.		Smoking	Non-
				Adult	<u>Child</u>	Roor	ms	_	Smoking
Studio	THB 3,400net/room/night	Single	Single						
	THB 3,700net/room/night	Twin/Double							
Studio Deluxe	THB 3,700net/room/night	Single							
	THB 4,000net/room/night	Twin/[Twin/Double						
Studio Lakeview	THB 4,100net/room/night	Single							
	THB 4,400net/room/night	Twin/Double							
Extra Bed	THB 1,500net/bed/night								
 The above regular Guarantee P Cancellation charge will be Check-in Political Check-out Politic	ary High speed internet access. Ates are NON-COMMISSIONABLE. Olicy: All reservations must be guaranteed. Policy: Cancellation without penaltee applied for late cancellation/No-shicy: The room is available from 14:00 blicy: The room must be vacated by ates are effective for bookings stay	ry must be how. OOhrs. Earl y 12:00 at t	made wit y check-ii the latest	hin 18:00h n to be off except in	ered sub	oject to l ate che	hotel	room's avai	_
SUV THB 1,800net/o Van THB 2,200net/o Limousine from the	,500net/car/way (Maximum 3 guo car/way (Maximum 5 guests) car/way (Maximum 8 guests) airport to the hotel □ Yes □ No		ousine fro	om the hot	el to the	e airport	t 🗆 Y	Yes □ No	
Guarantee & Payme									
	ent								
	Credit card no.: Type of Credit Card – Visa, Maste Name on credit card	er, AMEX, I	Diners or	JCB		/ date: _ e choose			
Remark:	☐ Credit card no.: Type of Credit Card – Visa, Maste Name on credit card	er, AMEX,	Diners or	JCB	Please	e choose	e one		and a back!!!
Remark:	Credit card no.: Type of Credit Card – Visa, Maste Name on credit card s are required in order to guarant	er, AMEX,	Diners or	JCB	Please	e choose	e one		rd shall be

Please note that the hotel's check-in time is from 14.00h and check out time is until 12.00 noon. This reservation form is strictly for the above conference only, guests who do not use this form will be considered they have personal arrangements.

Date

Please send the completed reservation form and payment authorization to:

E-MAIL: Ekkalak.c@shama.com, Sales.asoke@shama.com

Signature