

Hotel Room Reservation at Novotel Bangkok Suvarnabhumi Airport Hotel

ACI Asia-Pacific



999 Suvarnabhumi Airport Hotel Bldg., Moo1, Nongprue, Bang Phli, Samutprakarn 10540 Thailand Tel: (66) 2 131-1111 | Fax: (66) 2 131-1172 | Website: www.novotelairportbkk.com

PLEASE RETURN THE COMPLETED FORM TO;

Email: reservation@novotelairportbkk.com , sale_exec@novotelairportbkk.com

Name of Guest # 1:		Passport Details: Passport No.:	
Nationality:		Date of Birth:	
E-mail:		Phone:	
Name of Guest # 2:		Passport Details: Passport No.:	
Nationality:		Date of Birth:	
E-mail:		Phone:	
Name of Assistant:	E-mail:	Р	hone:
Date of Arrival:		Date of Departure:	
Arrival flight & time:		Departure flight & time:	
Tatal and of all all to	tal no. of nights: Room Type: Non-Smoking		
lotal no. of nights:		Room Type: Non-Smokin	g
Total no. of nights:	Acco	mmodation	9
The rates are on per ro	Acco com per night and are inclusive to adjust the tax charges shou	mmodation of 10% service charge, 7% Va	t, 2% provincial tax. The
The rates are on per ro	oom per night and are inclusive	mmodation of 10% service charge, 7% Va	t, 2% provincial tax. The
The rates are on per ro	oom per night and are inclusive t to adjust the tax charges shou	mmodation of 10% service charge, 7% Vaild there be any tax fluctuation i	t, 2% provincial tax. The in Thailand.



Cancellation Policy

Cancellation or Amendment of reservation should be notified to the hotel within 48 hours prior to your arrival date. In the unfortunate event of a cancellation less than 48 hours prior to your arrival date, the full no. of nights' reservation will be charged to your credit card as below credit card details and there will be no refund.

no retuna.				
Credit Card Details				
I hereby authorized Novotel Suvarnabhumi Airport Hotel to charge the room booking and other expenses during staying at the hotel to my credit card and I undertake to unconditionally honor and pay the said charges as and when I am billed for the same by the aforementioned bank. I agree to inform Novotel Suvarnabhumi Airport Hotel in writing about the alternative payment option in the event that the below card is cancelled, substituted or renewed.				
Credit Card No:	(16-Digits) Credit Card Type: VISA MASTER AMEX			
I certify that all information is completed and accurate and that I am the authorized signer of the credit card as listed above.				
Amount of transaction:	Actual signature of cardholder:			
	Cardholder name in print:			