



MANDARIN HOTEL

since 1965

The Thai Renal Pharmacist Group Clinical Meeting 2024: Essential Knowledge for Kidney Disease Management

จัดโดย สมาคมเภสัชกรรมโรงพยาบาล (ประเทศไทย)

20 – 22 November 2024

Mandarin Hotel Bangkok – Hotel Reservation form

Attention to: Reservation Department

662 Rama IV Road, Bangrak, Bangkok 10500 Thailand
Tel 66-2 238 0230 ext. Reservations. Fax 66-2 233 3185

Email: rsvn@mandarin-bkk.com; chonhinee.p@mandarin-bkk.com; pathaipischa.s@mandarin-bkk.com

Room Rates	Room type	Single Occupancy	Double Occupancy
	Deluxe Room	THB 2,300 net	THB 2,500 net

Room Rate inclusive of:

- The above rates are inclusive of breakfast and internet in room.
- Complimentary Free room upgrade to next category.
- Complimentary Drinking water 4 bottles per day.
- Rates quoted are inclusive of 10% service charge and 7% VAT.
- **Cancellation Policy:** Any cancellation or amendment shall notify to us 3 days prior to arrival. In the event of late notification, a cancellation charge one night will be applied.
- **No Show Policy:** If you fail to attend (no show), the hotel reserves the right to charge your credit card for one-nightstay.

First Name/ ชื่อ:		
Family Name/นามสกุล:		
Organization/หน่วยงาน:		
Address / ที่อยู่:		
City/ เมือง:		Country / ประเทศ:
Telephone/โทร:	Fax/แฟกซ์:	Email/อีเมล:

Please put the no. of room(s) required and the no. of guest (s) in the below room type

Deluxe Room ___ Room (s) ___ Person (s) (___ Twin Bed or ___ King Bed)

Airport Transfer by: **Full prepayment required for Hotel Limousine service**

Toyota Camry (3 guests maximum)	<input type="checkbox"/> Arrival (THB 1,200 net/car/way)	<input type="checkbox"/> Departure (THB 1,200 net/car/way)
Toyota Commuter Van (5 guests maximum)	<input type="checkbox"/> Arrival (THB 1,650 net/car/way)	<input type="checkbox"/> Departure (THB 1,650 net/car/way)

Arrival Date/วันเข้าพัก:	Flight No.	Arrival Time:
Departure Date/วันเช็คเอาท์:	Flight No.	Departure Time:

The room reservation is required to be guaranteed by a major credit card

Credit Card Company: _____ Card No. _____

Name of Cardholder: _____ Expiry Date: _____

Signature of Cardholder: _____

(Confirmation will be sent back when we receive the detailed information of credit card guaranteed)

***Please return the completed reservation form within 18 October 2024, after that the room are subject to room availability on that day. ***