**ROOM RESERVATION FORM**

Kind Attn: Ms. Lavina Rajani,

Reservation Coordinator,

Courtyard by Marriott Ahmedabad

Ramdev Nagar Cross Road, Satellite Road,

Ahmedabad, 380015

Tel: +91-79661 85000

Email: [cy.amdcy.reservation@courtyard.com](mailto:cy.amdcy.reservation@courtyard.com)

Dear Lavina,

**Room Reservation Requisition for ACMA Executive Committee Members**

May we refer to the ACMA room bookings at **Hotel Courtyard by Marriott, Ahmedabad.** Please book my accommodation in your hotel as per following:

## Check In Date:25th July 2019 Check Out Date:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.No** | **Category** | **Special Rate Per Room Per day for Single Occupancy** | **Special Rate Per Room Per day for Double Occupancy** | **Occupancy** |
| **1** | **Deluxe Rooms** | **6,300/- + 18% GST** | **6,950/- + 18% GST** |  |
| **2** | **Executive Deluxe Rooms** | **8,300/- + 28% GST** | **8,950/- + 28% GST** |  |
| **3** | **Deluxe Suite** | **13,550/- + 28% GST** | **14,500/- + 28% GST** |  |

**The above rate includes:**

* Accomodation
* One way on shared airport transfer
* Complimentary Buffet Breakfast & Buffet Dinner at Momo Cafe
* Wi-fi Internet

***Please note:***

1. ***Bookings should be done before 18th July 2019. Requests thereafter will be subject to availability*.**
2. ***Check in time is 15.00 hrs Check out time is 12.00 hrs***
3. ***The above special rates are valid for this particular booking*.**

**Arrival in Ahmedabad:** Flight No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Arrival Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Arrival Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Departure from Ahmedabad :** Flight No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Departure Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: ……………………………………………… Designation: ………………………………………………

Company Name: ……………………………………………….. Mobile No.: …………………………………

Tel: ……………………………… Fax: ……………………… E-mail: ………………………………………….

**Credit Card Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date: \_\_\_\_\_\_\_\_\_\_\_**

Airport Pick-up required: YES / NO (Please specify) ………………………………………………………..