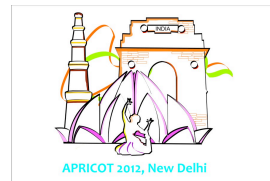


**INDIA TOURISM DEVELOPMENT CORPORATION**  
**HOTEL JANPATH ROOM RESERVATION FORM**



*Please fill and e-mail this form to Ms. Sheetal Sangalia at [apricotreservation@gmail.com](mailto:apricotreservation@gmail.com)  
For enquiries, please call 011-23368137 or 011-23742616*

DATE: .....

**RESERVATION DETAILS**

<p align="center"><b>Please note the taxes applicable:</b> 10% luxury tax on the published rate, 2.5% Service Charge &amp; 5.15% Service Tax</p>		<p align="center"><i>Please check [ ✓ ] to select</i></p>	
<p align="center"><b>Room Category (Standard/Superior)</b></p>		<p><b>Single</b></p>	<p><b>Double</b></p>
<p>Room Rate includes Breakfast &amp; WiFi</p>		<p>INR 6,000 [   ]</p>	<p>INR 7,000 [   ]</p>
<p>Last Name:</p>		<p>First Name:</p>	
<p>Designation / Organization:</p>			
<p>Address:</p>		<p>Country:</p>	
<p>Phone / Fax:</p>		<p>Email:</p>	
<p>Check-in Date:</p>		<p>Time:</p>	
<p>Check-Out Date:</p>		<p>Time:</p>	
<p>Passport No"</p>		<p>Place / Date Issue:</p>	
<p>Airport Transfer*: YES [   ]    NO [   ]    <i>*Airport Transfer Cost: INR 1.500 (Airport-Hotel-Airport)</i></p>			
<p>Arrival Flight ETA:</p>		<p>Departure Flight ETD:</p>	
<p>Remarks:</p>			
<p>I/We authorize the Hotel to charge the following Credit Card for:</p>			
<p>Credit Card Type:</p>		<p>Expiry Date:</p>	
<p>Credit Card No:</p>			
<p>Card Holder Name:</p>		<p>Copy of Credit Card (Front &amp; Back side)</p>	
<p>Signature of the Card Holder:</p>			

**Please Note:**

- Please be informed that a room cancellation is free of charge if done by 15<sup>th</sup> Jan, 2012. Penalty charges for cancellation made after 15<sup>th</sup> Jan, 2012 is one night.
- All Reservations must be sent by email to the given details of Corporate Marketing Division not later than 01<sup>st</sup> January 2012.
- All hotel bills will be settled directly by the guest.
- Check-in & check-out time is 1200 hrs (noon).