

# Diplomatic Conference on the Protection of Audiovisual Performances

Jun. 20-26, 2012 Beijing, China

## Jian Guo Hotel Reservation Form

Registration No. \_\_\_\_\_

Title: Prof.  Dr.  Mr.  Mrs.  Ms.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Nationality \_\_\_\_\_ Passport No. \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Accompanying Person' Name \_\_\_\_\_ Passport No. \_\_\_\_\_

Hotels	Room Level	Single Room	Twin Room	Deposit Per Room
Jian Guo Hotel (4star)	Business Room (without breakfast)	RMB 700net□	RMB 700net□	---
	Business Room (with breakfast)	RMB800net□	RMB920net□	---

Check-in Date \_\_\_\_\_ Check-out Date \_\_\_\_\_ Total Nights \_\_\_\_\_

I will share a twin room with another participant.

His (her) name is: \_\_\_\_\_.

- |   |
|---|
| <ul style="list-style-type: none"><li>* Non Guarantee reservation will be held until 18:00 on The day of arrival.</li><li>* Cancellation Policy: 24 hours before guest arrival to avoid one night room charge.</li><li>* Check-in time : 14:00      Check-out time : 12:00 noon.</li><li>* Please advise arrival flight number and credit card details to guarantee the above booking(s) by return.</li></ul> |
|---|

Credit Card Number : \_\_\_\_\_

Valid Thru : \_\_\_\_\_

Please complete this form and return it to:

Ms. Tina Shen

Fax: +86-10- 65067583 / +86-10-6595 8108

E-mail: tinashen@hoteljianguo.com