### RESERVATION REQUEST FORM

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| **Reservation Dept.** | Tel +82 2 2050 6000 | Email (TO) rsvn@acseoulgangnam.com |
| Sales Manager | Tel +82 2050 6065 | Email (CC) sm5@acseoulgangnam.com |

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| **1. GUEST INFORMATION** | |
| Title: | |
| Last Name: | First Name: |
| Email: | Phone No.: |
| Country: | Company: **KCAB INTERNATIONAL (대한상사중재원)** |

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| **2. HOTEL RESERVATION** | |
| **Hotel: AC Hotel by Marriott Seoul Gangnam** | |
| Check-in Date: | Check-out Date: |
| No. of Guest: | Accompany Name: |
| Bonvoy Account Number: | Bonvoy Account Level: |
| **Room Category** | **Daily Breakfast** |
| Estimated Hotel Arrival Time: |  |
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| \*Above room rates are quoted in KRW (10% Tax will be added)  \*Complimentary wired and wireless in-room internet | |
| \*Complimentary access to Fitness center and AC Lounge for all room category  \*Complimentary access to Sauna above Deluxe room category | |
| **\*Check-in time - 15:00 PM Check-out time - 12:00 PM** | |

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| **3. CREDIT CARD GUARANTEE INFORMATION** | |
| Credit Card: / | |
| Card Number: | Expiry Date: |
| Card Holder: |  |
| \*In case of cancellation or modification, please inform us 1 day prior to guest's arrival by 6 pm in local time  \*We will assess a fee of full amount of 1 night accommodation as written on the confirmation letter after this deadline | |
| **4. SPECIAL REQUEST** | |
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