



STRAITS CENTRAL TRAVEL & TOUR AGENCIES SDN BHD

[ROC No: 99030-A / MOTOUR License No: KKKP1162]

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ROOM RESERVATION FORM

Event : **Diabetes Complications Conference at Waterfront Hotel**

Event Date : **24th – 25th July 2018**

Guest Name : _____

No of Person : _____

Guest Contact : _____
(Email & Tel Number)

Hotel Name : _____

Check In Date : _____

Check Out Date : _____

Room Type : _____

Flight Details : _____
(Arrival & Departure)

Rate : _____

Remark / Request : _____