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| Hotel Booking Form |
| 2019 Conference on Empirical Methods in Natural Language Processing and  9th International Joint Conference on Natural Language Processing  November 3–7, Hong Kong, China |

**For hotel booking (except Regal Airport Hotel), please complete this form and send email to**

[emnlp-ijcnlp2019@hkcts.com](mailto:emnlp-ijcnlp2019@hkcts.com)

**Reference No. (Official Used Only):**

1. **PERSONAL INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title\* | |  | | |
| **Family Name: \*** | | Click here to enter text. | | |
| **First Name: \*** | | Click here to enter text. | | |
| **Country: \*** | | Click here to enter text. | | |
| **Telephone: \*** | Click here to enter, | | **Email: \*** | Click here to enter text. |

**B. HOTEL ACCOMMODATION**

|  |  |
| --- | --- |
| **Hotel Name:** | Click here to enter text. |
| **Check-in Date:** | Click here to enter date. |
| **Check-out Date:** | Click here to enter date. |
| **Total no. of nights:** | Click here to enter. |
| **Room Rate:**  (Per room per night) | HKDClick here to enter. |
| **Total Price (B):** | HKDClick here to enter. |
| **Special Request:** | Click here to enter. |
| **Room Type**\* **:** (Please ☑ if appropriate)  *Remark: Double room are subject to hotel availability.*  **Request**\***:**  (Please ☑ if appropriate)  *Noted: Smoking and Non Smoking are subject to hotel availability.*   |  |  |  |  | | --- | --- | --- | --- | | **\*\*Accompany Person** | | | | | **Family Name: \*** | | Click here to enter text. | | | **First Name: \*** | | Click here to enter text. | | |  | |  | | | | |  |  |

**Remarks:**

* Please note that rooms are limited and will be offered on a first come first served basis.
* Hotel room rates are special prepaid rate.
* A non-refundable and non-transferable prepayment is required upon confirmation.
* Hotel rates are valid for 2-8 November 2019.
* Participant(s) stay before or after 2-8Nov, 2019, will give a separate quote, rooms are subject to hotel availability.

1. **HOTEL TRANSFER (Please tick if appropriate)**

**PRICE: HKD100 per day per round trip transfer**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Hotel Name** | Click here to enter text. | | | | |
| **Date** | **3Nov** | **4Nov** | **5Nov** | **6Nov** | **7Nov** |
|  |  |  |  |  |
| **Total Price (C)** | HKDClick here to enter. | | | | |
| **Price** | HKD100 per day per round trip | | | | |
| **Route** | From above hotel to & from venue (AsiaWorldExpo) | | | | |
| **Cancellation** | Transfer ticket(s) is/are non-changeable, non-refundable | | | | |
| **Note** | Pick up schedule to be advised separately | | | | |

1. **PAYMENT (Please fill in the grand total amount for payment authorization)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **CREDIT CARD**   **(Please attach copies of FRONT and BACK sides of the credit card)**   |  |  | | --- | --- | | **GRAND TOTAL (B+C) IN HKD** Click here to enter.  **(Please write down TOTAL authorizing amount)** | | | Name of Card Holder: Click here to enter text. | | | Credit Card Number: Click here to enter text. | Expiry Date:  Click here to enter date | | Card Holder’s Signature:Click here to enter. | Date: Click here to enter date. |   *Before you proceed the payment, please make sure:*   * *Your card is allowed to make payment overseas.* * *Your visa or master card must be verified by Visa/Master.* * *Your card has the credit limit for the payment.*   *I hereby authorize China Travel Service (H.K) Ltd. to charge the Grand Total amount to my credit card for the payment of the services. I (We) fully understand that the booking is non-refundable, non-changeable, non-transferable, no cancellation can be made after booking is confirmed. Information provided above is true and correct to the best of my (our) knowledge.* |

\*Please save this form and send to [emnlp-ijcnlp2019@hkcts.com](mailto:emnlp-ijcnlp2019@hkcts.com)