

REGISTRATION CARD NO:



REGISTRATION CARD

NAME: VAIBHAV GARG
ADDRESS: ERIYADU ISLAND RESORT AND SPA
NORTH MALE' ATOLL
CITY: MALDIVES
COUNTRY: MALDIVES
TELEPHONE: 9153960
EMAIL: vaibhav.garg@pch.com.mv
PROFESSION: HEAD OF OPERATIONS
COMPANY: PCH
NO. OF VISITS TO MALDIVES: 12
NO. OF VISITS TO ERIYADU: 1

PASSPORT INFORMATION

NATIONALITY: INDIAN DATE OF BIRTH: 24-Nov-79
PASSPORT NUMBER: J12234JF ISSUE DATE: 1/1/2000 EXPIRY DATE 1/1/2020
PLACE OF ISSUE: MUMBAI
COUNTRY OF RESIDENCE: INDIA

STAY DETAILS

CHECK IN TIME: 2:00 PM
ARRIVING FROM: SL
DEPARTURE TO: MUMBAI
ARRIVAL: 12-Jan-14 ARRIVAL FLIGHT/TIME: UL 104
DEPARTURE: 16-Jan-14 DEPARTURE FLIGHT/TIME: UL 105
ADULTS: 2 CHILDREN: 1
TRAVEL AGENT: FTI
ROOM TYPE: SUP
ROOM NUMBER: 120 MEAL PLAN: AI
PAYMENT TYPE: ☐ CASH ☐ CREDIT CARD
CREDIT CARD TYPE: VISA

TERMS & CONDITIONS

All goods and services are subjected to 10% service charge and 8% TGST.

I agree that I am personally liable for the payment of my invoice. Should the third party indicated as being responsible for payment not do so, I accept that my liability for such payment shall be joint with such third party.

The hotel will not be held responsible for any valuables left by the guest in their room. Deposit Safe is available in the office free of charge. Personal cheques are not accepted.

Should you have any questions or require assistance, kindly contact the hotel management.

I have read and understand the disclosure information above and I agree to my information being used in the manner indicated.

CHECK OUT TIME: 12 NOON

GUEST SIGNATURE:

Date: