

MANAGE

ABSOLUTE

Firs tna me	Cus tom er Ref	Sur na me	Add res s 1		Pos tCo de	Mo bile no.	Em ail	Nati ona lity	Dat e of Birt h		Ge nde r	Che ck in dat e	Che ck out dat e	Roo m typ e	Roo m no
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