

BOOKING FOR SPA (ANGSANA & BANYAN) ROOMS

Name : _____ NRIC/Passport No : _____

Unit No : _____ (E-mail) _____

Contact No : (O) _____ (H) _____ (HP) _____

BOOKING DETAILS:

SPA Rooms : Angsana Room / Banyan Room Date of Use : _____

No. of Guests : _____ Session : 1 / 2 / 3
(Max. 4)

The applicant hereby agrees to abide by the following conditions imposed by the Management Office:

1. Permitted hours for usage of SPA rooms:
Monday – Sunday : Session 1 : 9.00am – 12.00pm / Session 2 : 1.00pm – 5.00pm / Session 3 : 6.00pm – 10.00pm
2. Booking and usage of SPA (angsana & banyan) rooms are limited to only 1 session per unit per month.
3. Only up to 1-month advance booking is allowed.
4. The booking fee is \$40/- per session. Payment can be made over the counter or deposit a crossed cheque into the Management Office letterbox. No cash is to be deposited. Cheque is to be made payable to “MCST Plan No; 3306”. The fees are non-refundable except for cancellations made at least 1 week (including the date booked) in advance. In this case, if residents wish to reschedule, the booking must be made 1 week in advance and subject to availability. If proper cancellations have been made, residents may reschedule without making additional payment.
5. Bookings can be made over the counter or by telephone during the office hours.
6. Telephone booking must be confirmed by faxing in the completed application form on the same day, and payment must be made by 10.00am the next working day.
7. The maximum no. of guests allowed per session is 4 only.
8. Residents are advised to submit a guest list (names & vehicle numbers) to the Management Office in advance to facilitate security control and guests' easy access into the premises.
9. Please bring along Resident Card at the time of use and when making a booking.
10. The resident host shall ensure that there should not be excessive noise or nuisance caused to other residents.
11. The resident host shall be responsible for the cleanliness and tidiness of the facility. All unwanted food, litter, etc. should be properly disposed of into the trash bins provided.
12. Inspection of the facility shall be carried out by the Management Office / security personnel to determine whether there has been any damage caused to the common property. All costs incurred in rectifying any damage are to be borne by the resident concerned.
13. The Management Office will not be held responsible for any injury, damage or loss of life, limb or property sustained by residents and their guests, howsoever caused when using the facility.
14. Residents are advised to shower before entering the Jacuzzi and the Bubble SPA.

Name of Applicant _____ Signature _____ Date _____

FOR OFFICIAL USE ONLY

Booking Fee : _____ Receipt Issued : _____

Cheque No. : _____ Approved / Issued By : _____

Date : _____

FOR OFFICIAL USE ONLY

Inspection by Security Guards

The furniture has been put back to its original position: Yes / No

Damage has been spotted : Yes / No
If yes, please specify : _____

Inspected by : _____

Acknowledged by : _____

Inspection by Cleaners

The furniture has been put back to its original position: Yes / No

Damage has been spotted : Yes / No
If yes, please specify : _____

Inspected by : _____

Acknowledged by : _____