



HOTELS & RESORTS

MANILA
ARANETA CENTER

Manual Room Reservation Form
Tracking No.:

Booked By:

Date / Time:

Booking Details

Last Name:		First Name:		Title:
Le Club Accorhotels #:		Membership Level: <input type="checkbox"/> Classic <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum		
Phone Number:		Email:		
Check-in Date:		Check-Out Date:		
Flight Number: ETA: _____H		Flight Number: ETD: _____H		
Transportation: <input type="checkbox"/> YES <input type="checkbox"/> NO / <input type="checkbox"/> ROUND-TRIP <input type="checkbox"/> ONE-WAY				
Vehicle Type:				
Number of Adults:		Number of Children (age 15 and under):		
Number of Rooms: _____ Superior Room _____ Executive Room <input type="checkbox"/> Presidential Suite _____ Deluxe Room _____ Executive Suite				
Bed Type / Smoking Preference: <input type="checkbox"/> Twin <input type="checkbox"/> King / <input type="checkbox"/> Non-Smoking <input type="checkbox"/> Smoking				
Other request/s:				
Rate:		Billing Arrangement:		
Special Requests: (Guest)		Remarks: (Internal)		

General Aguinaldo Avenue,
Araneta Center Cubao 1109
Quezon City, Philippines



Phone: +63 2 990 7888
Email: H7090-RE@accor.com

CREDIT CARD AUTHORIZATION FORM

Please provide your credit card details and other needed information below, at least 15 days prior to the date of arrival at the hotel. **A clear scanned copy of the front and back of the credit card and valid identification (preferably passport) with signature identical on the credit card is required together with this form.**

Please return this form by email H7090-RE@accor.com

BOOKING DETAILS

Name of the Guest : _____

Date of Stay : _____

Number of Nights : _____

Rate per Night : _____

Please indicate the charges to be debited from your credit card : Full account Room and Breakfast
 Dinner/Bed and Breakfast Room only

Others (please specify) : _____

CREDIT CARD DETAILS

Name of Cardholder as it appears on the card : _____

Full address of Cardholder: : _____

Billing Address if different: : _____

Contact Name : _____

Contact Telephone Number : _____

Credit Card Number : _____

Card Type : _____

Expiry Date : _____

Credit Card's Issuing Bank : _____

I, _____, hereby authorize Novotel Manila Araneta Center to debit my credit card as per the above details.

Cardholder's Signature