BLUE CORE Hotel

"Feel our warm service with no limit"

GROUP INFORMATION

GROUP'S NAME		NO OF PERSONS	

TOUR LEADER : ----------

No of Room		Rate
Single		
Double		
Twin		
Suite		
Ex. Bed		

	Arrival	Departure
Date		
Time		
Form		
To		
By		

ARRANGEMENT

MEALS	DATE						
	Breakfast						
	Lunch						
	Dinner						
Transfer/tour							
Other Service							

Complimentary Rooms : _____

Commission : _____

Account Instruction : _____

Remark : _____

Prepared by : _____

Date : _____

LIVEWORKSHEETS