

The 8<sup>th</sup> International Conference on Social Work in Health and Mental Health

## HOTEL BOOKING FORM

Book online at [www.icsw2016singapore.org](http://www.icsw2016singapore.org) or fax this completed form (2 pages) to **+65 6475 2077**  
Please choose only one option

**I. PERSONAL DETAILS DELEGATE** (Please print clearly and use a separate registration form for each delegate)

**Identification:**  Dr  Prof  A/Prof  Mr  Mrs  Miss (please tick one)

 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 First Name Middle Name Family Name

Job Title \_\_\_\_\_ Department \_\_\_\_\_

Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Country/Area Code \_\_\_\_\_ / \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail address \_\_\_\_\_

**Accompanying Person(s):** If sharing with someone, please give his/her name

 Dr  Mr  Mrs  Miss \_\_\_\_\_ / \_\_\_\_\_  
 First & Middle Name Family Name

**Other Personal Information:** (Please check your preferences)

**Food Preference**  No Preference  No Pork, No Lard  Vegetarian  No Beef

**Room Type Preference**  Smoking  Non-Smoking

\* Rates are subject to 10% service charge and prevailing Goods and Services Tax (GST), currently is at 7% GST

 \* Please indicate: (1) for most preferred choice, (2) for 2<sup>nd</sup> preferred choice & (3) for 3<sup>rd</sup> preferred choice, and your room requirements.

\* Room rate is inclusive of one breakfast / day for single room or two breakfasts per day for twin/double room and internet for 1 person.

**All room assignment will be made on a first-come first-served basis.**

Name of Hotel	Room Type	Room Rate in SGD (per room/per night)		Class	Choice Preferred in Numeric Order	Single with breakfast	Twin/Double with breakfast	Total No. of nights
		Single With breakfast for 1	Twin/Double With breakfast for 2			(a)	(b)	
<b>OFFICIAL HOTEL</b>								
Park Avenue Rochester	Deluxe	SGD230.00++	SGD255.00++	5 Star				
<b>PASIR PANJANG AREA</b>								
Santa Grand Hotel West Coast	Superior	SGD160.00 nett		2 Star				
	Deluxe	SGD185.00 nett		2 Star				
<b>CHINATOWN AREA</b>								
Dorsett Singapore	Deluxe	SGD230.00++	SGD250.00++	4 Star				
<b>HAVELOCK AREA</b>								
Grand Copthorne	Superior	SGD270.00++	SGD300.00++	5 Star				
Copthorne Kings	Superior	SGD220.00++	SGD250.00++	4 Star				
Furama Riverfront	Deluxe	SGD230.00++	SGD250.00++	4 Star				

Check-in Date: \_\_\_\_\_ Flight details: \_\_\_\_\_ Time: \_\_\_\_\_

Check-out Date: \_\_\_\_\_ Flight details: \_\_\_\_\_ Time: \_\_\_\_\_

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Please choose only one option

Name of Delegate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
First Name Middle Name Family Name

## II. MODE OF PAYMENT

CHECK CHOICES. YOUR ROOM RESERVATION IS NOT CONFIRMED UNTIL PAYMENT IS RECEIVED.

CREDIT CARD [please select one]     VISA     MASTERCARD     AMERICAN EXPRESS

Card Holder's Name (as in credit card) : \_\_\_\_\_

Credit Card Number : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_    Expiry Date : \_\_\_\_\_ / \_\_\_\_\_  
(15 digits for AMEX, 16 digits for VISA / MASTER) (mm / yy)

For AMEX credit card holders only, please fill in the four digits security numbers printed (non-embossed) on the right-hand corner of the card \_\_\_\_\_

For VISA/MASTERCARD credit card holders only, please fill in the three digits security numbers printed (non-embossed) on the signature panel on the reverse side of the card

\_\_\_\_\_

I hereby authorise the hotel to charge one room night as deposit for reservation of room/s and full duration for any cancellation of room/s made by me after 1<sup>st</sup> February 2016, Monday (Please refer to the Terms and Conditions listed below).

Signature of Cardholder: \_\_\_\_\_ (Essential)    Date of Authorisation: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Authorising Charge and Acknowledging Cancellation Policy) (dd / mm / yy)

## Terms and Conditions:

- TO ENSURE THAT A ROOM HAS BEEN RESERVED, ALL INFORMATION IN THE BOOKING FORM NEEDS TO BE FULLY COMPLETED WITH SIGNATURE AND FAX OR EMAIL TO THE CONFERENCE HOUSING BUREAU. NO RESERVATION WILL BE MADE FOR INCOMPLETE FORMS. EMAIL & TELEPHONE REQUESTS WILL NOT BE ACCEPTED.
- Please be informed that all hotel bookings made would be charged directly by the hotel booked.
- All official hotels would require a full credit card details including the credit card number, security code and expiry date and at least one night's room deposit (plus 10% service charge and prevailing government taxes) to secure reservation. The remaining payment should be settled at check-out and will be charged in Singapore dollars.
- Any cancellation must be notified in writing to **The 8th International Conference on Social Work in Health and Mental Health** Conference Secretariat & Housing Bureau at email: [hotel@icsw2016singapore.org](mailto:hotel@icsw2016singapore.org) by 1<sup>st</sup> February 2016, Monday. In this case, the Hotel shall be entitled to charge at least one (1) night's room charge (plus 10% service charge, and prevailing government taxes) to your credit card. For any cancellation received after 1 February 2016, Monday the Hotel shall be entitled to charge the full duration of room nights booked (plus 10% service charge, and prevailing government taxes) to your credit card.
- Kindly note the official check-in and the late check-out time (some hotels would have a different check-out time) and the charges:  
**Official check-in** time is at **1500hrs** and the check-out time is at **1100hrs or 1200hrs** and a **50% charge** will be imposed for check-out **before 1800hrs** and a **full day rate** for check-out **after 1800hrs**.
- For early arrival in the morning before check-in time, you are advised to book an extra room night. An extra room night would not be reserved should the Conference Secretariat & Housing Bureau not receive any instruction to do so by you. Should you be checking out late the late out charges as stated above Point 5 would apply.
- Please send by email or fax the duly completed and signed HOTEL BOOKING FORM to :  
**ICSW 2016** Conference Secretariat & Housing Bureau: c/o Ace:Daytons Direct (International) Pte Ltd  
2 Leng Kee Road #03-02 Thye Hong Centre Singapore 159086. Fax: +65 6475 2077 Email: [hotel@icsw2016singapore.org](mailto:hotel@icsw2016singapore.org)
- Room bookings through airline, corporate programmes and travel agents will not be entertained by the hotels during the Conference period.
- Please retain a copy of this form for your record.
- Within five working days from the receipt of the signed hotel booking form, an acknowledgement note with a confirmation number will be issued to you via email or fax only. Please state clearly your email address and fax number in the form.
- As a limited number of rooms have been reserved for participants, please make and confirm your booking early & promptly. The closing date for hotel reservations is 25<sup>th</sup> April 2016, Monday. After **25<sup>th</sup> April 2016**, the booking of rooms will be subject to room availability & prevailing rate at time of booking of the individual hotels. **The 8th International Conference on Social Work in Health and Mental Health** Conference Secretariat & Housing Bureau will assist in making arrangements on hotel reservations on your behalf.

## Disclaimer:

The information provided above by the **8th International Conference on Social Work in Health and Mental Health** Conference Secretariat & Housing Bureau are to assist you in your search for accommodation. The information provided is compiled in good faith.