

## **COMPLEX PCI 2022**

## **REGISTRATION FORM**

1	$\sim$ 1	ICCT	INFO	D N A	ΛТΙ	$\sim$ N I
	171	1621	HVEL	KIVI	411	l JIV

First Name:	Last Name:	Last Name:			( ☐ Mr. ☐ Ms.)		
Affiliation:							
Address:					Country:		
Phone:	Fax:	Fax:		Email:			
Accompanying Person ( Mr. Ms.)	First Name:	First Name:		Last Name:			
Check-in Date:	Check-out Date:	Check-out Date:		No. of Nights ( )			
Check-in Time:	Special Request:	Special Request:					
2. HOTEL AND ROOM PREFERENCE							
An official in charge	Hote	el		Special Room Rates			
Ms Jungyeon Kim / Ms Chaeah Park  Tel +82-2-2022-0000  Fax +82-2-2022-0567	Grand Walkerhill		☐ Delu	eluxe : KRW 278,300			
E-mail: jungyeon.kim@sk.com dianne.park@sk.com	☐ Vista Walkerhill ☐ Delu		uxe : KRW 338,800				
	Room Type	e & Preference					
Γ	Twin Beds		uble Bed				
Check in time is 15:00 & Check out time previous evening. Also late check-outs a before 17:00 and after 11:00.  * Notes 1. Grand Walkerhill & Vista Walkerhill & Vista Walkerhill & Vista Walkerhill & Rooms will be assigned on a first 3. The hotel will send you the confi 4. Breakfast charge is KRW39,930 p 5. Room rate & Breakfast charge in the second of the second	are subject to availabi nill Hotels are connecte -come first-served basi rmation for your room er person. clude SVC. Charge & Ta	ed to each other on s reservation.	nt off the	above rate  1 <sup>st</sup> floor.	-		
* In order to guarantee your room reservation			accompa	nied.			
		ro Card					
Card Type	_	Card	No.				

## \* Cancellation Policy

- Reservation is modifiable by 18:00PM on the 5-day before guest arrival.
- If guest fails to change or cancel before applied time on policy, one-night penalty charge will be applied.
- · All policies are based on hotel time.