Hotel Booking Form

**Recommended Hotel:**

**Songjiang New Century Grand Hotel Shanghai**

**松江开元名都大酒店**

**1799 North Renmin Road, Songjiang District, Shanghai 201620, China**

**Tel: +86-21-3766-8888, Fax: +86-21-3766-8988**

**E-mail:** [info.sjmd@kaiyuanhotels.com](mailto:info.sjmd@kaiyuanhotels.com)

**Web:** <http://songjiangshanghai.com/>**,** http://www.sjkymd.com/

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Gender |  |
| E-mail address | |  | |
| Do you chose **Songjiang New Century Grand Hotel ?** | | □ Yes □ No | |
| Requested stand room number in this hotel | |  | |
| Do you want share a room with other people? | | □ Yes □ No | |
| Do you have expected person to share with? | | □ Yes（Sharing person name）  □ No | |
| Check in time | |  | |
| Check out time | |  | |
| Other request | |  | |

For oversea attenders fill in the English form

国内参会者填中文表格

|  |  |  |  |
| --- | --- | --- | --- |
| 姓 名 |  | 性 别 |  |
| 手机号码 | |  | |
| 邮箱 | |  | |
| 是否入住上海松江开元名都大酒店 (**此项必需填写**) | | □ 是 □ 否 | |
| 预定上海松江开元名都大酒店标间的间数 | |  | |
| 是否选择拼房 | | □ 是 □ 否 | |
| 如选择拼房，是否有期望的拼房对象 | | □ 是 （拼房人姓名） □ 否 | |
| 预期入住时间 | |  | |
| 预期离店时间 | |  | |
| 其他要求和建议 | |  | |