



The Seventh IEEE International Conference on Control and Automation

Tuesday 8th December 2009 – Friday 11th December 2009

Accommodation Request Form

Name: _____

Address: _____

Contact Telephone: _____ Facsimile: _____

Check In Date: _____ Check Out Date: _____

Estimated time of arrival: _____ Number in party: _____

Names of other person (if sharing) _____

Smoking _____ Non-smoking _____

Please complete one form per room

Please tick preference:

Standard Queen/King	\$ 130.00 Inc	Room Only	<input type="checkbox"/>
Executive Queen/King	\$ 150.00 Inc		<input type="checkbox"/>
Chancellor King	\$ 160.00 Inc		<input type="checkbox"/>
Executive Chancellor King	\$ 180.00 Inc		<input type="checkbox"/>
1 bedroom Suite	\$ 220.00 Inc		<input type="checkbox"/>
2 bedroom Suite	\$ 270.00 Inc		<input type="checkbox"/>

To guarantee your booking, please provide us with your credit card details below, also attach a photocopy of both sides of the credit card for security purposes.

VISA _____ MASTER CARD _____ AMEX _____ DINERS CLUB _____

Card Number _____ Expiry Date: _____

Method of Payment (Please tick preference):

- ❖ Payment on departure by cash (Credit card details required as above)
- ❖ Payment on departure by cheque (1 nights accommodation enclosed)
- ❖ Payment on departure by credit card (details as above) **
- ❖ Please charge back to my company. Please note a credit application form will be forwarded with confirmation of this booking. This form must be completed and returned 2 weeks prior to arrival for credit facilities to be available.

Check in time is from: 2:00 pm

Check out is by: 10:00 am

Luggage Storage is available

Special requests: _____

Please forward your accommodation requests to: Reservations Department

Hotel Grand Chancellor
P O Box 22-335
Christchurch

Telephone: (64) 3 379-2999 0800 2 SLEEP Facsimile: (64) 3 379-0999 Email: res@grandc.co.nz