

HOTEL CONFIRMATION

10-SEP-21

Thank you for choosing Regal Airport Hotel, Xi'an. Please find below details of your reservation.

Date of Booking / Amendment / Cancellation: 10-SEP-21

Reservation Confirmation ☒

Amendment ☐

Cancellation ☐

Attention: ☐ 925 Club (membership no. :)

Contact Name: _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname	First Name	Confirmation No.
1) Zhao	Yu Chao	25581417
<input type="checkbox"/> Regal Rewards (membership no. :)		
2) _____		
3) _____		

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1

Room Type: Deluxe Suite

Room Rate: CNY 1699 Net

No. of Persons: 1

Inc 1 Breakfast

Arrival Date: 16-SEP-21 Flight: _____ Time: _____

Departure Date: 17-SEP-21 Flight: _____ Time: _____

Request: ☐ Smoking ☒ Non-Smoking ☐ Twin bed ☐ King bed ☐ Baby cot
☐ Connecting ☐ Lower floor ☐ Others (Please specify) _____

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Room Only ☐ All Expenses

☐ Others (Please specify) _____

☐ Third Party Payment (Separate payment instruction is required)

☐ Room ☐ All

☐ Others (Please specify) _____

Credit Card Holder Signature _____

Payment confirmed and guaranteed by Company _____

Please sign with company chop _____

Guarantee: ☐ Company Account

☐ Deposit Paid

☐ Credit Card

Name Printed on Credit Card: _____

Card Type : Cash

Credit Card Number : _____



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- Credit card guarantee or prepayment as per specific rate plan is required for all reservations. Otherwise, hotel reserves the final right to release the booking without prior notice.

Remarks: _____

Contact Person: Reservations Department

Tel: (86 29) 3801 1111

Fax: (86 29) 3801 0888

Email: info@regalxianairporthotel.com

No.1, 1st Kong Gang West Street, Xi'an Xianyang International Airport, Di Zhang Town, Wei Cheng District, Xianyang City, Shaanxi Province, 712035, P.R.C.
陕西省咸阳市渭城区底张镇西安咸阳国际机场空港西一路1号 邮政编码:712035

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Reservation Confirmation ☒

Amendment ☐

Cancellation ☐

Attention : ☐ 925 Club (membership no. :)

Contact Name : _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname	First Name	Confirmation No.
1) Tian	Hong Yu	25580908
<input type="checkbox"/> Regal Rewards (membership no. :)		
2) _____		
3) _____		

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1	Room Type: Executive Club Deluxe
Room Rate: CNY 950 Net	No. of Persons: 1
Inc Breakfast	Arrival Date: 16-SEP-21 Flight: _____ Time: _____
	Departure Date: 17-SEP-21 Flight: _____ Time: _____

Request: ☐ Smoking ☒ Non-Smoking ☐ Twin bed ☐ King bed ☐ Baby cot
☐ Connecting ☐ Lower floor ☐ Others (Please specify) _____

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Room Only ☐ All Expenses

☐ Others (Please specify) _____

☐ Third Party Payment (Separate payment instruction is required)

☐ Room ☐ All

☐ Others (Please specify) _____

Credit Card Holder Signature _____

Payment confirmed and guaranteed by Company _____

Please sign with company chop _____

Guarantee: ☐ Company Account

☐ Deposit Paid

☐ Credit Card

Name Printed on Credit Card: _____

Card Type : Cash

Credit Card Number : _____

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Attention: ☐ 925 Club (membership no. :)

Contact Name: _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname	First Name	Confirmation No.
1) Guo	Si Si	25580910
<input type="checkbox"/> Regal Rewards (membership no. :)		
2) _____		
3) _____		

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1	Room Type: Executive Club Deluxe
Room Rate: CNY 950 Net	No. of Persons: 1
Inc Breakfast	Arrival Date: 16-SEP-21 Flight: _____ Time: _____
	Departure Date: 17-SEP-21 Flight: _____ Time: _____
Request: <input type="checkbox"/> Smoking <input checked="" type="checkbox"/> Non-Smoking	<input type="checkbox"/> Twin bed <input type="checkbox"/> King bed <input type="checkbox"/> Baby cot
<input type="checkbox"/> Connecting <input type="checkbox"/> Lower floor	<input type="checkbox"/> Others (Please specify) _____

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account ☐ Company Account ☐ Third Party Payment (Separate payment instruction is required)

☐ Room Only ☐ All Expenses ☐ Room ☐ All

☐ Others (Please specify) _____ ☐ Others (Please specify) _____

Credit Card Holder Signature _____

Payment confirmed and guaranteed by Company _____

Please sign with company chop _____

Guarantee: ☐ Company Account
☐ Deposit Paid
☐ Credit Card

Name Printed on Credit Card: _____

Card Type : Cash

Credit Card Number : _____

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Attention : ☐ 925 Club (membership no. :)

Contact Name : _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname	First Name	Confirmation No.
1) Xu	Le Han	25580911
<input type="checkbox"/> Regal Rewards (membership no. :)		
2) Yan Ru Li		
3)		

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1	Room Type: Executive Club Deluxe
Room Rate: CNY 1050 Net	No. of Persons: 2
Inc Breakfast	Arrival Date: 16-SEP-21 Flight: Time
	Departure Date: 17-SEP-21 Flight: Time
Request: <input type="checkbox"/> Smoking <input checked="" type="checkbox"/> Non-Smoking <input type="checkbox"/> Twin bed <input type="checkbox"/> King bed <input type="checkbox"/> Baby cot	
<input type="checkbox"/> Connecting <input type="checkbox"/> Lower floor <input type="checkbox"/> Others (Please specify)	

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Third Party Payment (Separate payment instruction is required)

☐ Room Only ☐ All Expenses

☐ Room ☐ All

☐ Others (Please specify)

☐ Others (Please specify)

Credit Card Holder Signature

Payment confirmed and guaranteed by Company

Please sign with company chop

Guarantee: ☐ Company Account

☐ Deposit Paid

☐ Credit Card

Name Printed on Credit Card: _____

Card Type : Cash

Credit Card Number : _____

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Attention: ☐ 925 Club (membership no. :)

Contact Name: _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname	First Name	Confirmation No.
1) Liu	Chun Long	25580907
<input type="checkbox"/> Regal Rewards (membership no. :)		
2) Peng Li		
3)		

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1	Room Type: Executive Club Deluxe
Room Rate: CNY 1050 Net	No. of Persons: 2
Inc Breakfast	Arrival Date: 16-SEP-21 Flight: _____ Time: _____
	Departure Date: 17-SEP-21 Flight: _____ Time: _____

Request: ☐ Smoking ☒ Non-Smoking ☐ Twin bed ☐ King bed ☐ Baby cot
☐ Connecting ☐ Lower floor ☐ Others (Please specify) _____

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Third Party Payment (Separate payment instruction is required)

☐ Room Only ☐ All Expenses

☐ Room ☐ All

☐ Others (Please specify) _____

☐ Others (Please specify) _____

Credit Card Holder Signature _____

Payment confirmed and guaranteed by Company _____

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Guarantee: ☐ Company Account

☐ Deposit Paid

☐ Credit Card

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Card Type : Cash

Credit Card Number : _____



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Contact Name : _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname

First Name

Confirmation No.

1) Li

Xiang

25580912

☐ Regal Rewards (membership no. :)

2) Qi Hang Zhang

3) _____

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1

Room Rate: CNY 1050 Net

Inc Breakfast

Room Type: Executive Club Deluxe

No. of Persons: 2

Arrival Date: 16-SEP-21

Flight: _____ Time _____

Departure Date: 17-SEP-21

Flight: _____ Time _____

Request:

☐ Smoking

☒ Non-Smoking

☐ Twin bed

☐ King bed

☐ Baby cot

☐ Connecting

☐ Lower floor

☐ Others (Please specify) _____

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Room Only

☐ All Expenses

☐ Others (Please specify) _____

☐ Third Party Payment (Separate payment instruction is required)

☐ Room

☐ All

☐ Others (Please specify) _____

Credit Card Holder Signature _____

Payment confirmed and guaranteed by Company _____

Please sign with company chop _____

Guarantee: ☐ Company Account

☐ Deposit Paid

☐ Credit Card

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Amendment ☐

Cancellation ☐

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Contact Name : _____

Company / Agent Name: China Comfort Xian Intl Service CO.LTD

Telephone No. : _____

Fax / _____

Surname Xiong First Name Gui Yang Confirmation No. 25580909
☐ Regal Rewards (membership no. :)
2)
3)

*Please provide your Regal Rewards membership number. If you are not a member, please feel free to inquire the details upon your arrival.

No. of Room: 1 Room Type: Executive Club Deluxe

Room Rate: CNY 1050 Net

No. of Persons: 1

Inc Breakfast

Arrival Date: 16-SEP-21 Flight: Time

Departure Date: 17-SEP-21 Flight: Time

Request: ☐ Smoking ☒ Non-Smoking ☐ Twin bed ☐ King bed ☐ Baby cot
☐ Connecting ☐ Lower floor ☐ Others (Please specify)

All rates quoted are in CNY and subject to 15% surcharge and prevailing government tax, unless otherwise quoted.

Payment: ☒ Guest Own Account

☐ Company Account

☐ Room Only ☐ All Expenses

☐ Others (Please specify)

☐ Third Party Payment (Separate payment instruction is required)

☐ Room ☐ All

☐ Others (Please specify)

Credit Card Holder Signature

Payment confirmed and guaranteed by Company

Please sign with company chop

Guarantee: ☐ Company Account

☐ Deposit Paid

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