亞洲心血管影像學會(ASCI)第十三屆年會

The 13th Congress of the Asian Society of Cardiovascular Imaging

Validity: Mar18~24,2019

To: Khotels Chang-an Date: _____

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Address :台北市中山區松江路 61-1 號

A. Guest Details (Please TYPE or PRINT Clearly in CAPITAL LETTERS)

Salutation: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Prof.

Surname:_____ First Name: _____

Tel: _____ Fax: _____ E-mail: _____

Arrival Date (mm/dd):_____Departure Date (mm/dd):_____

B. Room Type	**Special Rates**
商務客房（一大床） Superior Double Room	☐ NT$ 3,600net
商務客房 (兩小床) Superior Twin Room	☐ NT$ 3,800net
柯達套房 (一大床) K Deluxe Double Room	☐ NT$ 5,550net

*All the room type inclusive one or two daily breakfasts

C. Airport Transportation (from Taoyuan or Songshan International Airport to the hotel)

☐ Mercedes Benz (from Taoyuan NT$1,600/trip/car; can take 1-3 persons); the number of persons: _____

☐ Mercedes Benz (from Songshan NT$1,100/trip/car; can take 1-3 persons); the number of persons: _____

☐ T4 (from Taoyuan NT$1,600/trip/van; can take 4-6 persons); the number of persons: _____

☐ Toyota Camery (from Songshan NT$8,00/trip/car; can take 1-3 persons); the number of persons: _____

Arrival Flight No.: _____ Arrival Time: _____

D. Payment Details

Credit Card: ☐ VISA ☐ MasterCard ☐ American Express ☐ JCB ☐ Diners

Card No : ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date: / (MM/YY)

Card Holder Name (printed): _____ Security Code: ☐☐☐

Authorized Signature: _____ Date: _____

NOTE: _____

KHOTELS CHANG-AN

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