

HOTEL RESERVATION FORM

ILA 33 Convention and Technical Symposium

Please check ☒ in ☐ and fill in the blank area using block letters, and return this form
via Fax: +81-3-3442-8118 or e-mail: shinagawaph@seibutransel.co.jp to SEIBU TRAVEL, INC.

1. Name:

Name: Mr. Ms. /
(Family name) (First name)

2. Name of accompanying person(s) if any:

Name: Mr. Ms. /
(Family name) (First name)

3. Official address

Representing Country (Administration) or Organization:

Official Title

Address:

Telephone:

Facsimile:

E-mail:

4. Hotel Accommodation

Name of Hotel	Room Type	Period of Stay
Takanawa Prince Hotel Sakura Tower	Single use	Check in date:
	Twin use	Check out date:
New Takanawa Prince Hotel	Double use	Period of stay: Night(s)