



INTERCONTINENTAL.  
BALI RESORT

RESERVATION & BILLING AUTHORIZATION FORM  
Mediator Beyond Border International Group  
05 – 09 November 2019

To: **Group Reservation**  
**Ms. Ari Genitri**  
**InterContinental Bali Resort**  
Email: [dpscha-group@ihg.com](mailto:dpscha-group@ihg.com)

NAME :

ADDRESS :

PHONE :

E-mail:

HOTEL ACCOMODATION:

Room Type and Rate	No of Room	Arrival	Departure	Arrival Flight	Departure Flight
Jimbaran Deluxe at USD 140 Net/room/night					
Singaraja Premium at USD 200 Net/room/night					
Club Room at USD 350 Net/room/night					
Premium Club Duplex Suite at USD 410 Net/room/night					

**Note:** \*Room rate is inclusive of breakfast for two persons per room

\*Room rate is inclusive 21% tax and service

**TERM AND CONDITION**

- To hold your reservation, one night non-refundable accommodation payment as holding deposit will be charged to the Credit Card guarantee once the reservation made,
- The above rates are available for booking received on or before 2<sup>nd</sup> September 2019.
- Any booking received after 2<sup>nd</sup> September 2019 will be subject to availability at prevailing rate applicable
- Full payment of remaining charges is required 30 days prior to arrival date.
- Please return this form with complete data and signature
- Any cancellation received within 7 days prior to arrival date or no-show reservation will be charged a full stay cancellation / no show fee.

I hereby authorize InterContinental Bali Resort to place the charges indicate below on my credit card, to be processed without my signature, and to charge one night non-refundable accommodation:

American Express       Visa       Diners Club       Master Card

Full Name of Card Holder: ..... Expiry date:...../ .....

Address where Credit Card Statement is sent: .....

Phone number: .....

Card number:..... Signature: .....

**AIRPORT TRANSFERS**

Resort's Taxi      USD 40.00net/car/way (maximum 3pax in a car)  Yes       No

Jalan Uluwatu 45, Jimbaran, Bali 80361, Indonesia

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