

PERSONAL DETAILS

Name: Address:

INDIAN Petrochem - 2025



18th & 19th November 2025

GUEST RESERVATION FORM

Please fill and send this form to us sahil@eliteconferences.com
Filling in this form in advance will enable priority to check-in on arrival

Contact Person: Mr. Sahil Shah **Phone:** +91-22-23851430 / 9833022522

Company:

	Mobile:	Email:		
FLIGHT DETAILS				
Hotel Check-in Date:		Hotel	Hotel Check-out Date:	
Arrival Date:	Flight No:	Arriva	l Time:	
Departure Date:	Flight No:	Depa	rture Time:	
Room Type	e Days o	f stay	Single / Double occupancy	
Deluxe Room	n	INF	10,000 / INR 11,000 plus taxes	
Buffet Breakfast at Co Wi-Fi AIRPORT TRANSF	·	Not Required		
PAYMENT INFORM	IATION			
PAYMENT INFORM I will settle my bills by	IATION	☐ Credit Card		
	Cash	☐ Credit Card	v Date: (mm-yy)	
I will settle my bills by	Cash	☐ Credit Card		
I will settle my bills by If Credit Card, State N	Cash	☐ Credit Card		
I will settle my bills by If Credit Card, State N Card Holder's Name: Card Holder's Signatu	Cash	☐ Credit Card		
I will settle my bills by If Credit Card, State N Card Holder's Name: Card Holder's Signatu All reservations are to be	Cash lumber:	☐ Credit Card Exping	ν Date: (mm-yy)	
I will settle my bills by If Credit Card, State N Card Holder's Name: Card Holder's Signatu All reservations are to be Check-in time: 14:00 Hrs	Cash lumber:	Credit Card Expire	nfirmed unless specifically requested	