

No.	First Guest	Second Guest (in case of Double room)	Position	Room Type	Check In Date	Check Out Date	No Of Nights	Arrival Date	Flight No	Time	Departura Date	Flight No2	Time2
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													

This Form must be received not later than **15, January, 2023**. Please email to hotelsqp23@gmail.com