



Brides/Grooms Last Name Wedding Reservation Form

Please indicate your reservation request below:

Date of arrival _____ Number of nights _____

Number of guests: Adults _____ Children* _____ *children 17 and under stay when sharing a room with an adult.

Choice of room type: One queen size bed Non smoking or smoking:
 One king size bed Non-smoking
 Two double beds Smoking

Your preferred rates: One adult, \$000.00; Two adults, \$000.00; Each additional adult, \$00.00

Name _____

Address: Apartment # if applicable Street _____ City _____ Province/State _____ Postal Code/Zip Code _____

Please Guarantee My Stay to Credit Card: _____ Expiry Date _____
We accept Visa, MasterCard, American Express, Discover and JCB Credit Card Number _____

Please call, mail, fax or e-mail your reservation to:
Jl. Labersa | Siak Hulu – Kampar | Pekanbaru – Riau 28000 | Indonesia

Tel: (+62) 812 9444 1224 E-Mail: sgm@labersa.com

Complimentary weekday newspaper, local telephone calls, in-room coffee, exercise room, outdoor pool.

Place direction map to property in this space