



Bukit Jawi Golf Resort

ACCOMMODATION & TRANSFER REQUEST FORM

THIS PART MUST BE COMPLETED IF ACCOMMODATION IS REQUIRED AT "BUKIT JAWI GOLF RESORT"

NAME: _____

ADDRESS : _____

POSTCODE: _____ STATE: _____ COUNTRY: _____

TELEPHONE NO: _____ MOBILE: _____ FAX: _____

I WOULD LIKE TO BOOK (please indicate how many rooms is required in the box provided):-

EXECUTIVE ROOM @ RM 190.80 NETT PER ROOM PER NIGHT
(1 KING SIZE BED FOR 2 PERSONS with BREAKFAST)

DELUXE ROOM @ RM 164.30 NETT PER ROOM PER NIGHT
(2 SINGLE BED FOR 2 PERSONS with BREAKFAST)

SUPERIOR ROOM @ RM 222.60 NETT PER ROOM PER NIGHT
(3 SINGLE BED FOR 3 PERSONS with BREAKFAST)

DELUXE FAMILY @ RM 275.60 NETT PER ROOM PER NIGHT
(2 KING SIZE BED FOR 4 PERSONS with BREAKFAST)

* The above prices is inclusive of 6% Service Tax.

* Please note that Tourism Tax applies for non Malaysian. The rate is RM10 per room per night.

CHECK IN: (Date / Time) _____ CHECK OUT : (Date / Time) _____

* I WISH TO SHARE MY ACCOMMODATION WITH :

(I) _____ PARTICIPANTS? : YES / NO

(II) _____ PARTICIPANTS? : YES / NO

ARRIVAL : ETA IN PENANG (Date/ Time) _____ FLIGHT NO : _____

DEPARTURE : ETD EX PENANG (Date/ Time) _____ FLIGHT NO : _____

* I REQUIRE TRANSFER ON _____ FOR WHICH I WILL PAY IF I AM NOT A
NOMINATED PLAYER.

I AGREE TO SETTLE ALL PERSONAL BILLS INCURRED BY ME DURING MY STAY BEFORE MY DEPARTURE. I
WISH TO PAY A DEPOSIT OF RM 50.00 TO SECURE MY BOOKING BY:-

CASH DEPOSIT/ ONLINE BANKING INTO BUKIT JAWI GOLF RESORT BERHAD'S **CIMB BANK BERHAD**
ACCOUNT NUMBER **8004141520**. (Please have your name and mobile number written on the transaction slip and
fax/email to us)

VISA / MASTER (Please select one) CARD NUMBER : _____
EXPIRY DATE: _____ / _____ (MM/YY) CARD HOLDER'S NAME : _____

DATE _____

SIGNATURE _____

Please fax or e-mail to:

BUKIT JAWI GOLF RESORT BERHAD

LOT 414, MK 6, JALAN PAYA KEMIAN SEMPAYI, 14200 SUNGAI JAWI, SEBERANG PERAI SELATAN, MALAYSIA.

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