Reservation Form for UoH Guest House

Personal Information	
○ Name:	○ Father Name:
○ CNIC:	○ Permanent Address:
○ Organization:	○ Designation:
○ Phone:	○ Cell No:
○ E-mail Address:	
○ Purpose of Visit	○ Personal ○ Official ○ Referred By:

Accommodation Details	
○ Check-In date:	○ Check-Out Date:
○ Room Type	○ Twin (Double or Single Occupancy) ○ Single
○ Food	○ Breakfast ○ Lunch ○ Dinner

Rent (Category)
○ UoH official guest (No Charges) ○ UoH employees Rs. 500/- ○ Officials other than UoH employee Rs. 1000/night ○ Non Officials Rs. 1500/night

Caretaker Remarks:

- ○ Rooms are available for the specified duration; we welcome you at UoH Guest House.
- ○ Room is not available for the specified duration; we regret your request.
- ○ An additional amount of Rs. 500/- per day may be charged for use of Air Condition/Heater.

_____ **Guest Signature**	_____ **Care Taker Guest House**

Note: With the approval of Vice Chancellor, the Caretaker may revise the form as he may deem fit.