# Reservation Form for UoH Guest House

| Personal Information | | |
|---|---|---|
| **Guest** | | ○ Room No. |
| ○ Name: | ○ CNIC: | ○ Cell No.: |
| | | |
| ○ Organization: | ○ Designation | |
| ○ Wife: Yes/No | ○ Children | |
| Others: | | |
| ○ Name: | ○ CNIC: | ○ Cell No.: |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| ○ Purpose of Visit: | ○ Personal<br>○ Official<br>○ Referred By: | |

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

**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 night may be charged for use of AC/Heater & Geezers.
- ○ 10% service charges to be paid to the cook/waiter(s) at the Guest House for catering & serving.
- ○ No free stay of official guests, the amount of rent will be paid by concerned department/office which can be reimbursed through proper channel.

| _____<br>**Guest Signature** | _____<br>**Care Taker Guest House** |
|---|---|

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