



MALAYSIAN JUNIOR OPEN GOLF CHAMPIONSHIP
SAUJANA GOLF & COUNTRY CLUB
19th - 21st SEPTEMBER 2012
ACCOMMODATION REQUEST FORM

This part must be completed if accommodation is required at the THE SAUJANA HOTEL

NAME : _____ GENDER : _____
ADDRESS : _____
COUNTRY : _____ EMAIL : _____
TEL NO : _____ FAX NO: _____

(For 2 Invited players and an Official / Team Manager per country only)

FLIGHT NO / ETA in KLIA: _____ **FLIGHT NO/ETD ex KLIA** _____

The Saujana Kuala Lumpur

2 KM Off Sultan Abd. Aziz Shah Airport Highway

Saujana, 47200, Subang

Selangor Darul Ehsan

Tel : 03-78431234

Fax : 03-78463008

Email : reservations@thesaujana.com

Contact person : En. Nizam

Room rate: RM 255.20 nett (Single /Double Superior)

SAUJANA
HOTELS & RESORTS

I wish to share accommodation with _____

Check in at Hotel : _____ (Time & Date)

Check out from Hotel : _____ (Time & Date)

COST OF ACCOMMODATION

* I agree to settle all personal bills incurred by me at the hotel before my departure. I wish to pay by cash

or Credit Card and my number is _____ Member since _____

Expiry Date _____

SIGNATURE : _____ DATE : _____

**** Please delete accordingly***