

# 2007 MAP&RTS

Period : October 10.2004(Wed) ~ October 12.2007(Fri)

Venue : West Japan General Exhibition Center Annex

In order to give the facilities which participate to you in holding of a 2007 MAP&RTS.

We are preparing the following hotel for the Nishitetsu-Travel co.,ltd.

We are waiting for much of your use from the heart.

<b>NISHITETSU TRAVEL CO., LTD.</b>		2-1-1Uomachi Kokurakita-ku Kitakyushu	
<b>TEL:+81-93-521-1951</b>	<b>FAX:+81-93-531-0498</b>	<b>Person in charge : Idegami</b>	

## Hotel Accommodations

Nishitetsu Travel Co., Ltd. has reserved a sufficient number of hotel rooms at special discounted rate for this Fair.

H O T E L	Single room	Twin room (per 1 person)	
<b>Nishitetsu Inn KOKURA</b> From venue 5 min by walk	¥ 6 , 0 0 0		Snack meal only
<b>Bluewave Inn KOKURA</b> From venue 1 min by walk	¥ 7 , 5 0 0	¥ 7 , 0 0 0	Included Breakfast and Tax
<b>Rihga Royal Hotel KOKURA</b> From venue 2 min by walk	¥ 1 1 , 0 0 0	¥ 1 0 , 0 0 0	

## Cancellation

In the event hotel reservation is canceled, written notification should be sent .

The following cancellation fees will be deducted.

7 to 3 days prior to the first night stay	30% of daily room charge
2 or 1 day prior to the first night stay	50% of daily room charge
The first night stay and no notice given	100% of daily room charge

## Application and payment

- Participants wishing to make reservations for hotel accommodations should complete the application form and fax it to Nishitetsu Travel Co., Ltd.
- Application for hotel accommodations should be accompanied by full payment of total room charges in advance.
- Please pay the hotel fee at the hotel reception counter at time of check-in by yourself.

## 2007 MAP&RTS Application Form

Participants wishing to make reservations for hotel accommodations should complete the application form and fax it to Nishitetsu Travel Co., Ltd.

**FAX: +81-93-531-0498    Person in Charge: IDEGAMI**

**Dead Line: 20 / Sep / 2007**

Company name			
Address		Country	
TEL.NO		FAX.NO	
E-mail			
Arrival flight No. and date :		Departure flight No. and date :	

**Full Name of the visiting person(s) :**

- |     |     |     |                 |                |
|-----|-----|-----|-----------------|----------------|
| 1 . | Mr. | Ms. |                 |                |
|     |     |     | ( Family Name ) | ( Given Name ) |
| 2 . | Mr. | Ms. |                 |                |
|     |     |     | ( Family Name ) | ( Given Name ) |
| 3 . | Mr. | Ms. |                 |                |
|     |     |     | ( Family Name ) | ( Given Name ) |
| 4 . | Mr. | Ms. |                 |                |
|     |     |     | ( Family Name ) | ( Given Name ) |

**HOTEL ACCOMMODATIONS**

Hotel	Number of rooms	Period of stay	
1 <sup>st</sup> Choice _____ Hotel	_____ Single room(s)	Check-in _____	With Breakfast
2 <sup>st</sup> Choice _____ Hotel	_____ Twin room(s) (    ) and (    ) (    ) and (    )	Check-out _____ <       > night(s)	

.....date:.....

.....Signature:.....

( Signature of person in charge )

# West Japan General Exhibition Center

## How to get to the Fair Site

