

Coordinator
Guest House
Malaviya National Institute of Technology
J.L.N., Marg, Jaipur-17

Date:

Subject: Request For Reservation Of Guest House I/ Guest House II

1. Name of the Guest

2. Full address

3. Purpose of Visit

4. Category: AC Non-AC

5. No. of Members

6. Number of Bed rooms required: Single Double:

7. Expected arrival Date: Time: Am/ Pm

8. Expected departure Date: Time: Am/ Pm

9. Boarding/ Lodging charges will be paid by the guest: Yes No

10. Guest not to be charged Budget Head

Project/Other.....

11. Remarks.....
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Bed Tea/ Breakfast/ Lunch/ Evening Tea/ Dinner

Date:

Signature

Name: _____

Designation: _____

Department: _____

Telephone No.: _____