

Inquiry Request Form

Kindly fill out all information below to request for a quotation. Fax the accomplished form to (02) 750-1503 and wait for our confirmation via phone call. After receiving your request, we will fax a quotation to you in 2 to 3 days.

Company Name :	
Company Address :	
Contact Person / Position :	
Cellphone No :	
Telephone Nos :	
Fax Nos:	
Email Address :	
Conforme / Position :	
Tentative Date :	
No. of Days :	First Meal :
☐ Whole day Only / Day Swimming☐ Night Swimming	□ Breakfast□ Morning Snack□ Lunch
No. of Pax:	
Type of Function: Live-in Seminar Live-out Seminar	Last Meal:
 □ Day Tour Package (Outing) □ Venue Only (Outing) □ Party □ Others (Pls. Specify) 	☐ Morning Snack☐ Lunch☐ Afternoon Snack☐ Dinner
Which Brand (Resort-Hotel):	No. of Main Courses: (For Lunch & Dinner Only)
☐ Splash Oasis☐ Splash Mountain☐ City of Springs	☐ One ☐ Two ☐ Three
Type of Accommodation :	_ ,
 ☐ Single Occupancy ☐ Twin Occupancy ☐ Triple Occupancy ☐ Quad Occupancy ☐ Quintu Occupancy ☐ Dormitory Occupancy 	Name of Account Manager: