

Restaurant reservation application form

Reception date

Reservation date _____		Receptionist:	
Reservation time _____ : _____ ~ _____ : _____		Road Station kyotamba Ajimnosato	
group name _____		TEL.+81 771 89 2310 FAX.+81 771 89 2313	
Phone number that can be contacted on the day _____		Email. ajim@ajim.info	
company phone number _____		Travel agency name _____	
Travel agency address 〒 _____		person in charge name _____	
_____		company fax number _____	

Total number of customers Tote _____ Each Adults _____
 ※Other than crew and tour conductors _____ Children _____

meal menu meal name _____
 _____ yen X _____ meals

meal of the crew and tour conductors _____ meals
 ※Food court menu up to 1000 yen is free.

total amount _____ yen Payment method is cash only on the day.

Dinner venue Alcoholic beverage
 Restaurant ▪ Meeting room need ▪ unnecessary

memo

Please cancel at least 3 days before the reservation date.
 A cancellation fee will be charged after that.
2days ago 30%・the days before 50%・On the day of reservation 100%
 Please stick to one type of menu.
 Please let us know at least one week in advance if you have any allergies.

レストラン確認サイン

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変更回数	変更内容	日付	コンシェルジュ	レストラン
NO.				
NO.				
NO.				