

**The 28th International Conference on the Theory and Application of  
Cryptology and Information Security (Asiacrypt 2022)**

專案訂房單適用期間(Validity):2022/12/4-12/10

Khotels Taipei 1 (台北一店)

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Address : 1, Ln.11, Sec.2, Zhongshan N. Rd., Taipei, Taiwan

A. Guest Details (Please TYPE or PRINT Clearly in CAPITAL LETTERS)	
Salutation: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	
Surname: _____ First Name: _____	
Tel: _____ Fax: _____ E-mail: _____	
Arrival Date (mm/dd): _____ Departure Date (mm/dd): _____	
B. Room Type Special Rates	
商務客房 (一大床) Superior Double Room	<input type="checkbox"/> NT\$ 2,750net
商務客房 (兩小床) Superior Twin Room	<input type="checkbox"/> NT\$ 3,000net
*All the room type inclusive one or two daily breakfasts.	
C. Payment Details	
Credit Card: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> JCB <input type="checkbox"/> Diners	
Card No : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Expiry Date: / (MM/YY)	
Card Holder Name (printed): _____ Security Code: <input type="text"/> <input type="text"/> <input type="text"/>	
Authorized Signature: _____ Date: _____	
NOTE: _____	

\* Cancellation shall be made at least 3Days prior to check-in date, otherwise one-night room rate will be charged as a penalty

Date: \_\_\_\_\_

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Cryptology and Information Security (Asiacrypt 2022)**

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Khotels Linsen (台北林森)  
 Tel: +886-2-2571-2222  
 Fax: +886-2-2581-0011  
 E-mail: linsen@khotels.com.tw  
 Address : 76, Linsen N. Rd., Taipei, Taiwan

<b>A. Guest Details (Please TYPE or PRINT Clearly in CAPITAL LETTERS)</b>	
Salutation: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	
Surname: _____ First Name: _____	
Tel: _____ Fax: _____ E-mail: _____	
Arrival Date (mm/dd): _____ Departure Date (mm/dd): _____	
B. Room Type	Special Rates
行政客房 (一大床) Executive Double Room	<input type="checkbox"/> NT\$ 3,000net
<b>* Inclusive one or two daily breakfasts.</b>	
C. Payment Details	
<b>Credit Card:</b> <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> JCB <input type="checkbox"/> Diners	
Card No : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> Expiry Date: / (MM/YY)	
Card Holder Name (printed): _____ Security Code: <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
Authorized Signature: _____ Date: _____	
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