Government MLA Guest House
Room Booking Registration Form
Bhubaneswar, Odisha

Please fill the following details clearly in BLOCK letters.

MLA ID:	_____
MLA Name:	_____
MLA Type:	_____
Aadhar Number:	_____
Mobile Number:	_____
Booking For:	_____
Purpose of Visit:	_____
Check-In Date:	_____
Check-In Time:	_____
Check-Out Date:	_____
Check-Out Time:	_____
Total Rooms:	_____
Total Amount:	_____

Guest Details

Sr.No.	Guest Name	Booking Date	Relation	Age	Gender	Mobile	Email

Declaration:

I hereby declare that the above information is true and correct to the best of my knowledge. I accept the terms and conditions for room booking.

Signature of Applicant

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