

Birla Institute of Technology, Patna Campus

Guest Reservation Form

Guest Details

Name: _____

Address: _____ City: _____

State: _____ Postal Code: _____ Country: _____

Phone Number: _____ Email: _____

ID Type (Passport/Aadhaar/DL etc.): _____ ID Number: _____

Booking Details

Check-In Date: _____ Time: _____

Check-Out: Date: _____ Time: _____

Number of Rooms: _____ Number of Guests: _____

Terms and Conditions

1. All rooms are air-conditioned, with rates of ₹1250 per day for a double bed and ₹1500 for a suite, excluding food charges.
2. Check-in time is 11:00 AM, and check-out time is 10 AM. Early check-in or late check-out may incur additional charges. If check-in time is after 6 am and check-out time is before 6 pm, full day charge shall be applicable.
3. Smoking/Consumption of alcohol is prohibited inside the campus.
4. Guests are responsible for any damages to the property during their stay.
5. Personal belongings are the responsibility of the guest.

I hereby acknowledge that I have read and agree to the terms and conditions of the stay.

Guest Signature and date: _____

Approval for Institute Guests

Purpose (Exam/Interview/Lecture/Others): _____

Discount requested (in %): _____

Name and Signature: _____

(In-Charge of Requesting Section/Department)

Approved/Not Approved

Director

For Office Use

Allotted/Not Allotted/Not Available Room No. _____

Payment Mode: [] Cash [] Online Payment (UPI No _____)

Total Amount Paid: _____ Receipt Number: _____

Signature (Guest House Superintendent) _____

Signature (Prof. I/C Guest House/ AR) _____