

GUEST PREFERENCE FORM

Salutation	First Na	me			Last Name	
Email			Data of I):4l.		
Email			Date of I	sırtn	<u> </u>	
Would you pr *Subject to availabili	refer a non-smo	king room?	$\bigcirc X$	/es	○No	
Interests						
☐ Cooking	Dining		Diving	□ F	Fashion	☐ History
☐ Fine Wine	☐ Fishing		Golf	□ I	Hiking	☐ Music
☐ Reading	☐ Art	ΠТ	Cechnology		Theatre	☐ Cinema
☐ Tennis	☐ Others	please specif	y:			
What kind of	welcome ame	nity would y	ou prefer?			
○FRUITS. I	Please specify y	our preferred	l fruits.*			
0	Apple	Grapes	Orange		○ Banana	
\circ	Pineapple (Mango	○ Guava		C Local fru	its in season
\circ	Others Please S	Specify:				
○ICE CREA	.M. Please spec	cify your pref		-	-	lability as they may be out of s
	-	Chocolate	○ Ube/Ya		○Mango	
0	Cheese (Strawberry	Others Pl	ease S	Specify:	
		J				
What jam/ma	armalade woul	d you prefer	to have dur	ing b	reakfast	
○ Strawberry	○ Orange	ge (Mango		○ Apple	\bigcirc Honey
○ Guava	○ Red R	aspberry	⊃ Santol			
Others, ple	ease specify:					



What scent woul	ld you prefer in	your room?				
○ Vanilla		○ Orange	e CLemo	on		
○ Lavander	vander		ne Cinn	amon		
Others, please	specify:					
Which newspape	er/s would you p	refer?				
☐ Philippine Star ☐ Manila Standard ☐ Philippine Daily Inquirer						
☐ Manila Bullet	in Herald 7	Tribune	Asia Wallstree	et Journal		
☐ Manila Shimb	oun 🗌 Others, j	please specify:				
What type of pil	low would you p	refer?				
Shape		,	Size	Filling		
○ Regular / Standard Pillow		○ Small (28 ○ Medium ○ Large (64	(53x37 cm)	○ Feather ○ Polyester		
○ Bolster Pillow		○ Small (55		○ Feather ○ Polyester		
○ Body Pillow	(125x24cm soft with p	polyester filling)				
Orthopedic F	Pillow (expandable, r	made of memory foar	m / heat sensitive materi	ials that conforms to the body		
Do you require a If so, please speci		tance, medical	requirements or	special diet while in house?		
Do you wish to b	•		unpacking and	packing of your suitcase		
If yes, please prov	vide exact arrival	/ departure time	e:			
Date.			(Guest Signature		