



Meem Atoll Statehouse Guest Registration Card

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Guest Information:

- Full Name: _____
- Address: _____
- City: _____
- State: _____
- ZIP Code: _____
- Country: _____
- Phone Number: _____
- Email: _____

Stay Details:

- Arrival Date: _____
- Departure Date: _____
- Room Number: _____

Additional Information:

- Number of Adults: _____
- Number of Children: _____
- Purpose of Visit: _____
- Special Requests: _____

Emergency Contact:

- Name: _____
- Relationship: _____
- Phone Number: _____

Agreements:

1. I agree to comply with all hotel policies and regulations.
2. I understand that I am responsible for any damages caused during my stay.

Signature: _____ Date: _____

