

ACCOMMODATION AND TRANSFER FORM

Please type in the form and return to the Organizing Committee by February 15, 2010 preferably as a PDF file or by fax.

I am a participant	/ an accompanying person		
Name	Family name	First name	Middle name
Single room	Double room		
Single semisuite		Double suite	
I would like to share a room/suite with: participant			
accompanying person			
		nobody	
Room-mate name	Family name	First name	Middle name
Date of arrival		Date of departure	9
Time of arrival		Time of departure	9
Arrival flight No.		Departure flight No	
Arrival train No.		Departure train No	

Date_____

Signature_____