

## Fifth Annual Meeting of Women Speakers of Parliament

Vienna, 13-14 July 2009 organised by the National Council of Austria and the Inter-Parliamentary Union

## HOTEL REGISTRATION FORM

Hotel Sacher Wien

## To be completed and returned by 20 June 2009

Last Name: _	
First Name:	
Title:	
Telephone Number:	
Fax Number:	
Email address:	
Arrival Date: _	
Arrival Time: Please note that the regula	r check in time is 2.00pm, check out time is 12 noon.
Depature Date:	
□ Superior Single Room for	<b>g hotel accommodations:</b> or at € 199, per room and night for at € 199, per room and night
	se at € 395, per room and night at € 395, per room and night
Credit card number with	expiry date:
<b>Special Requests:</b> □ Non Smoking Room	□ Smoking Room
	ncelled without charges until 48 hours prior to the arrival. In case of too late cancellation e one night as a cancellation fee. We duly noted that all charges will be paid directly at
We would be pleased to p ask you to advise the flight	ick you up from the airport with a Mercedes Limousine at the rate of $\in$ 45, and kindly details if desired:
Flight Number:	Arrival Time:
Deter	
We are looking forward to	welcoming you at the Hotel Sacher Wien!

KINDLY FAX OR MAIL THIS FORM TO:FAX. 0043 1 51456 799 OR EMAIL: reservation.vienna@sacher.com

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