ISO/IEC JTC1/SC 32 Meetings 11 – 22 April 2005 Berlin

* HOTEL RESERVATION FORM *

To: Berlin Excelsior Hotel Attn: Reservation Manager Tel: +49 30 315522 Fax: +49 30 3155-1053 E-Mail:<u>reservierung@hotel-excelsior.de</u>

cc: Secretariat, NI Attn: Mr. Wischhoefer Tel: +49 30 2601-2535 Fax: +49 30 2601-42535 Email: <u>cord.wischhoefer@din.de</u>

We look forward to welcoming you in Berlin. In order to help us to prepare your visit, you are kindly requested to complete the form below an return by fax directly to the Berlin Excelsior Hotel **not later than 4 March 2005**. Once this deadline is over, we cannot guarantee further availability of hotel rooms.

Single Room (including breakfast): EUR 90.00 +++ per room per night Double Room (including breakfast): EUR 110.00 +++ per room per night

Room Booking - Key Word: "SC 32 Meetings 2005"						
Name (Mr/Ms/Mrs/Dr)						
Company						
Telephone No.			Fax No)_		
Email						
Arrival Date		Arrival	Flight 8	k Time		
Departure Date		Depart	ure Time	е		
Room Type	Single		1	Double		
Special Requests	Smoking			Non-Sm	oking	
Other Requests						

Payment Details (A credit card number is required for booking)			
Credit Card Type	Amex / Visa / Master Card / JCB / Diner		
Name of Cardholder			
Card No.	Expiry Date		

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To: Hotel Sylter Hof Berlin Attn: Reservation Manager Tel: +49 30 2120-233/-234 Fax: +49 30 2141648 E-Mail: reservation@sylterhof.com

cc: Secretariat, NI Attn: Mr. Wischhoefer Tel: +49 30 2601-2535 Fax +49 30 2601-42535 Email: <u>cord.wischhoefer@din.de</u>

We look forward to welcoming you in Berlin. In order to help us to prepare your visit, you are kindly requested to complete the form below an return by fax directly to the Berlin Excelsior Hotel <u>not later than 13 March 2005</u>. Once this deadline is over, we cannot guarantee further availability of hotel rooms.

Single Room (including breakfast): EUR 79.00 +++ per room per night Double Room (including breakfast): Not available

Room Booking - Key Word: " SC 32 Plenary and SC 32/WG Meetings 2005"				
Name (Mr/Ms/Mrs/Dr)				
Company				
Telephone No.			Fax No.	
Email				
Arrival Date		Arriva	Flight & Time	
Departure Date		Depart	ure Time	
Room Type	Single			
Special Requests	Smoking		Non-Sm	oking
Other Requests				

Payment Details (A credit card number is required for booking)		
Credit Card Type	Amex / Visa / Master Card / JCB / Diner	
Name of Cardholder		
Card No.	Expiry Date	