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| **Please attach additional sheet if necessary and fill in by computer.** | **FORM 04 / 1** |
| **ISU Member Federation:** |       |
|  |  |
| The Organizing Committee will try its utmost to make the hotel reservation according to your wishes. To know the details we ask you to fill in the blanks below. Nevertheless we beg your pardon if technical changes must be made. |
| **We would like to ask for accommodation in the following way:** |
| Kande International HotelSingle or Twin : HKD1,0001. **Single-Bed Room** **All rates are per room / per night and include the local taxes WITH breakfast.**
 |
|  | Name |  | Given Name |  | Function |  | Arrival Date |  | Departure Date |
| 1 |       |  |       |  |       |  |       |  |       |
| 2 |       |  |       |  |       |  |       |  |       |
| 3 |       |  |       |  |       |  |       |  |       |
| 4 |       |  |       |  |       |  |       |  |       |
| 5 |       |  |       |  |       |  |       |  |       |
| 6 |       |  |       |  |       |  |       |  |       |
| 7 |       |  |       |  |       |  |       |  |       |
| 8 |       |  |       |  |       |  |       |  |       |
| 9 |       |  |       |  |       |  |       |  |       |
| 10 |       |  |       |  |       |  |       |  |       |
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**TERMS OF RESERVATION**

1. All requests for reservations must be made to the Organizing Committee by **July 5, 2019 latest**.
2. The reservation will be confirmed directly through the Organizing Committee. At the same time, the Organizing Committee will inform about the payment procedure.
3. Terms of payment: **100% payment (full payment) by July 12, 2019**
4. Changes and cancellations shall be made in writing and directly to the Organizing Committee.
5. Non-refundable after payment

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| ISU Member Federation: |       |
| Date, Signature: |       |

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| **Please attach additional sheet if necessary and fill in by computer.** | **FORM 04 / 2** |
| **ISU Member Federation:** |       |
|  |  |
| The Organizing Committee will try its utmost to make the hotel reservation according to your wishes. To know the details we ask you to fill in the blanks below. Nevertheless we beg your pardon if technical changes must be made. |
| **We would like to ask for accommodation in the following way:** |
| Kande International HotelSingle or Twin : HKD1,0001. **Twin-Beds Room** **All rates are per room / per night and include the local taxes WITH breakfast.**
 |
|  | Name |  | Given Name |  | Function |  | Arrival Date |  | Departure Date |
| 1 |       |  |       |  |       |  |       |  |       |
|  |       |  |       |  |       |  |       |  |       |
| 2 |       |  |       |  |       |  |       |  |       |
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| 3 |       |  |       |  |       |  |       |  |       |
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| 4 |       |  |       |  |       |  |       |  |       |
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4. Changes and cancellations shall be made in writing and directly to the Organizing Committee.
5. Non-refundable after payment.

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| ISU Member Federation: |       |
| Date, Signature: |       |