# FINAL TRAVEL FORM – FORM “D”

# DEADLINE: JULY 25th 2014

COUNTRY**:**

|  |  |  |  |
| --- | --- | --- | --- |
| **ARRIVAL 1** | | **DEPARTURE** | |
| Airplane / Train / Car |  | Airplane / Train / Car |  |
| Arrival date |  | Departure date |  |
| Arrival time |  | Departure time |  |
| Flight no. |  | Flight no. |  |
| Arriving to (airport) |  | Departing from (airport) |  |
| Coming from (airport) |  | Going to (airport) |  |
| No. of persons |  | No. of persons |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ARRIVAL 2** | | **DEPARTURE** | |
| Airplane / Train / Car |  | Airplane / Train / Car |  |
| Arrival date |  | Departure date |  |
| Arrival time |  | Departure time |  |
| Flight no. |  | Flight no. |  |
| Arriving to (airport) |  | Departing from (airport) |  |
| Coming from (airport) |  | Going to (airport) |  |
| No. of persons |  | No. of persons |  |

**AIRPORT TRANSFER**

We would like airport transfer from the official airport CPH to the official hotel and back:

**YES Number of persons: \_\_\_\_\_ NO**

**SHUTTLE TRANSPORT**

We would like shuttle transport between the official hotel and the venue (from Thursday to Sunday):

**YES Number of persons: \_\_\_\_\_ NO**

*Please see fees, payment and bank details in Bulletin #2.*

**THIS FORM MUST BE RETURNED BY JULY 25th 2014 TO:**

Event Manager Christina Laub Frank: E-mail: christina.frank@skytteunion.dk

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