



## Hotel Registration Form — Headquarter Hotel "The Westin Grand"

Please complete the registration form and fax it to:  
 +49 30-284499-11 (Porstmann Kongresse GmbH, Germany)

### PARTICIPANT

 

Ms.	Mr.	Academic Degree	Name	First Name
Street		Zip Code	City	Country
E-Mail		Phone	Fax	

Name of Accompanying Person \_\_\_\_\_

### HOTEL ACCOMMODATION

I require hotel accommodation at

**The Westin Grand \*\*\*\*\***

Friedrichstraße 158-164, 10117 Berlin, Germany  
 www.theberlingrandhotel.com

Single: 259 €

Double: 289 €

Breakfast: included

Number: \_\_\_\_ Single Room

Number: \_\_\_\_ Double Room

Arrival: \_\_\_\_ June 2010

Departure: \_\_\_\_ June 2010

Extras:  Car park

Non-smoking room

Late check in

Notes: \_\_\_\_\_

**I guarantee this hotel reservation with the following Credit Card:**

VISA-Card

Mastercard

American Express

Credit Card Number: \_\_\_\_\_

Valid until: \_\_\_\_ / \_\_\_\_

Credit Card Owner: \_\_\_\_\_

**Hotel reservation will be confirmed. Please note that reservation once agreed is binding.**

Date \_\_\_\_\_

Signature \_\_\_\_\_