

**THIS FORM MUST RETURN UNTIL MARCH, 13th 2022**

Please fill in with type or write in capital letters!

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:**A. Single Rooms**

Name	Given Name	Arrival Date	Depart. Date
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____
11	_____	_____	_____
12	_____	_____	_____

B. Double-Bed Rooms

Name	Given Name	Arrival Date	Depart. Date
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____



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C. Triple-Bed Rooms

Name	Given Name	Arrival Date	Depart. Date
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____

ISU Member Federation: _____

Date, Signature: _____



Please send to:
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e-mail: TriglavTrophy1@gmail.com



and
SLOVENE SKATING UNION
Fax: +386 1 439 15 41
e-mail: drsalna.zveza@siol.net