



**SÉMINARY / COURSE**

**Date and time:**

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**Seminary title:**

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**Group leader:**

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**Address:**

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**Tel / Fax:**

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**E-mail:**

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**MEETING**

- |                                    |   |                                    |
|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> FlipChart | <input type="checkbox"/> Retroprojector | <input type="checkbox"/> CD Player |
| <input type="checkbox"/> DVD       | <input type="checkbox"/> Video-TV       | <input type="checkbox"/> Beamer    |

- |   |   |
|---|---|
| <input type="checkbox"/> Room for 12 people | <input type="checkbox"/> Room for 26 people |
| <input type="checkbox"/> Room for 50 people |   |

**Other:**

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**Signature:**

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*We kindly ask you to read the rules*

**STAY**

**Arrival date and time:**

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**Check-in before 5.00 p.m.**

**Departure date and time:**

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**Check-out 10.00 a.m.**

↔ **Rooms** **S** † ..... **D** † † .....

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**MEAL**

**Nr. breakfast:**

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**Nr. lunch:**

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**Nr. dinner:**

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**Observations:**

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*After your request, we will send you an offer.*