



Registration form IFFR Scandinavian Section Fly-In
Vilnius Lithuania 8/8-11/8 2019

| | | |
|--|-----------------------|------------------------|
| Means of transportation By car: Other: | Aircraft Registration | Aircraft Make & Model |
| Pilot surname | | Pilots first name |
| Pilot Passport no | | Pilot Nationality |
| Pilots Address | | Date of birth yy-mm-dd |
| Pilots home number | Pilots mobile number | |
| Pilots e-mail address | | |
| Person to be contacted in case of emergency | Contact phone number | |

I confirm that I will fly in a legal manner within the limitations of my licence and rating. All flight operations will be the pilot's responsibility.

Pilot's signature: _____

Registration latest by Jun 30 2019
Send Registration form to: bo@sitdown.se

Program Fee: 310 EUR per person. The fee includes all bus transfers, entrance fees, restaurants expenses excluding drinks.

| Participation fee | Price | Total |
|-------------------|-----------------|-------|
| Program Fee | 310 EUR | |
| Double room | 120 EUR / night | |
| Singel room | 110 EUR / night | |

Hotel booking are made directly to the hotel by <https://www.congressavenue.lt/en/>

After July 12, any rooms that have not been booked will be released. After that, the regular daily price applies. Reservation code as stated – **IFFR**

Specific requests are taken with the hotel such as special beds, etc.

All prices are in EUR and include breakfast buffet and wi-fi. Pay directly to the hotel for your room.

Pay Program Fee to IFFR Scandinavian Sweden account in EUR or Cash when you arrive in Vilnius

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|---|--|
| Payment in Sweden BankGiro 593-9749 | International wire tranfer Bank: Sala Sparbank, Box 43, 73321 Sala, Sweden BIC: SWEDSESS IBAN: SE54 8000 0828 4200 4660 2892 |
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WELCOME TO VILNIUS
IFFR SCANDINAVIAN SECTION

More information at www.iff.net or contact Janis Andersons +371 28 68 08 88



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Passenger

| | | |
|---|------------------------|--|
| Surname | First name | |
| Passport no | Nationality | |
| Address | Date of birth yy-mm-dd | |
| Phone home number | Mobil number | |
| Person to be contacted in case of emergency | Contact Phone Number | |

| | | |
|---|------------------------|--|
| Surname | First name | |
| Passport no | Nationality | |
| Address | Date of birth yy-mm-dd | |
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