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International Symposium on Uranium Production and Raw Materials for the Nuclear Fuel Cycle (UP) Vienna, 20 – 24 June 2005

HOTEL RESERVATION FORM

In order to request that a hotel reservation be made on your behalf, kindly fax or email this completed form to the above address no later than May 17th. Please complete in block letters.

LAST NAME_____FIRST NAME_____

COUNTRY

ADDRESS _____

TELEPHONE	FAX	E-MAIL

Please indicate the name of a preferred hotel and give 2 alternatives. In case you require accommodation in a short-term apartment, please specify your size/price/location requirements, and the projected duration of vour stav

NAME OF PREFERRED HOTEL	SINGLE	DOUBLE	REMARKS

A block reservation has been made 19 – 25 June.

ARRIVAL DATE & TIME_____ DEPARTURE DATE_____

Guarantee/Deposit:

• By credit card (payment to be settled at the hotel): AMERICAN EXPRESS ت VISA أ DINERS CLUB أ MASTER/EUROCARD Credit Card Number: Expiration Date:

In the absence of a credit card, a deposit of EUR 100,--- is required and must be paid in the form of a cheque mailed to American Express, which will be returned to you during your stay.

Please note that no reservation can be made without valid credit card information (or a deposit of EUR 100.-) and that the full payment must be settled directly with the hotel/apartment.

The confirmation of your hotel reservation will be sent to you by mail or fax. Should you need to cancel this reservation, please inform us in time, otherwise a one-night fee will be charged

Date:_____

Signature: