## IFFR Berlin FLY-OUT 2016

## Registration



Please complete with Acrobat Reader. Send the form back to:

IFFR Germany / Austria . Ingo Neufert . c/o MARINGO Computers GmbH

Stolberger Str. 114a . 50933 Cologne / Germany

Email: neufert@maringo.de

| Pilot / Skipper / Head of Group  |   |                 |                          |                         |                     |                      |  |
|--|---|-----------------|--------------------------|-------------------------|---------------------|----------------------|--|
| Family name:   | Breitenthaler   |                 |                          | First name:             | Friedrich           |                      |  |
| Address:   | Pacelliallee 5  |                 |                          | Mobile / Cell:          | +49 172 3223457     |                      |  |
|  | Berlin  |                 |                          | Email:                  | f.breitenthaler     | @bauwerke.org        |  |
| Postcode / ZIP:  | 14195   |                 |                          | lame on badge:          | Fritz Breitenthaler |                      |  |
| Aircraft type:   | Cirrus SR22 GT  | TS .            | A                        | ircraft call sign:      | D-ELCE              |                      |  |
| Dietary Requirements: e.g. vegetarian, vegan, food allergies   |   |                 |                          |                         |                     |                      |  |
|  | Name of emergency contact: Peter Breitenthaler                      |                 |                          |                         |                     |                      |  |
|  | Phone: +43 664  | 2527688         | Email of e               | emergency conta         | ppb@itserv          | vice.at              |  |
| I / We arrive by:  | car   | Commercial fl   | light >                  | Airplane to So          | chönhagen           |                      |  |
|  | Please indicate your participation for each activity.               |                 |                          |                         |                     |                      |  |
|  | Date  | Bus tour        | Fly out                  | Number of av<br>for the |                     | Looking for a Seat   |  |
|  | Monday 18th   |                 | $\times$                 | 3                       |                     |                      |  |
|  | Wednesday 20th  |                 | $\times$                 | 3                       |                     |                      |  |
|  | Friday 22nd   |                 | $\times$                 | 3                       |                     |                      |  |
| <b>Bundeskanzleramt</b> : Do send us birth data for security check in connection with our visit to the Bundeskanzleramt. |   |                 |                          |                         |                     |                      |  |
|  | Day of birth: 04  |                 |                          | e of birth:             | Wels                | Austria              |  |
|  |   |                 |                          |                         |                     |                      |  |
| Passenger/ Group member 1  |   |                 |                          |                         |                     |                      |  |
| Family name:   |   |                 |                          | First name:             |                     |                      |  |
| Address:   |   |                 |                          | Mobile / Cell:          |                     |                      |  |
|  |   |                 |                          | Email:                  |                     |                      |  |
| Postcode / ZIP:  |   |                 | N                        | lame on badge:          |                     |                      |  |
| Dietary Requirements:  |   |                 |                          |                         |                     |                      |  |
| e.g. vegetarian, vegan, food allergies   |   |                 |                          |                         |                     |                      |  |
|  | Name of emergency contact:  |                 |                          |                         |                     |                      |  |
|  | Phone:  |                 |                          |                         |                     |                      |  |
|  | Priorie.  |                 | Email of                 | emergency cont          | act:                |                      |  |
|  | Please indicate you   |                 | n for each acti          | ivity.                  |                     |                      |  |
|  | Please indicate you  Date   | r participation |                          |                         |                     |                      |  |
|  | Please indicate you  Date  Monday 18th                              |                 | n for each acti          | ivity.                  |                     |                      |  |
|  | Please indicate you  Date  Monday 18th  Wednesday 20th              |                 | n for each acti          | ivity.                  |                     |                      |  |
|  | Please indicate you  Date  Monday 18th                              |                 | n for each acti          | ivity.                  |                     |                      |  |
| Bundeskanzleramt:  | Please indicate you  Date  Monday 18th  Wednesday 20th  Friday 22nd | Bus tour        | n for each acti  Fly out | ivity.  Looking for     | a Seat<br>]<br>]    | nzleramt.<br>Country |  |