



XVIII INTERNATIONAL AIDS CONFERENCE
JULY | 18-23 | 2010 | VIENNA AUSTRIA

Rights Here, Right Now

Fields marked in red can be completed electronically

Travel Booking Form

Title: Mr Ms Prof. PD Dr.

First Name: _____ Family Name: _____

Please note: The name cannot be changed after the booking is completed. Make sure that you enter the name the same way it is written in your passport to avoid problems at check-in or immigration.

Company: _____ Department: _____

Address Line 1: _____ Address Line 2: _____

Postal Code: _____ City: _____ Country: _____

Email: _____ Phone: _____ Fax: _____

FLIGHT

Please fill in the information below to receive your personalised travel offer:

Outbound journey

From _____ **To** _____ **Date** _____ morning afternoon evening

Return journey

From _____ **To** _____ **Date** _____ morning afternoon evening

Frequent Flyer Programme

Airline Number

Special meal request

Seat Request

window aisle

Reservations and Payment Policy

For bookings, please complete this reservation form and return it by email to flights@aims2010.org or by fax to +41 840 20 20 10. Upon receipt, we will provide you with a detailed flight offer by email reflecting your request and discounts granted. Your booking is only finalised once you agree with the offer. Payment is due at the time of ticketing and can only be made by credit card.

Rebooking / Cancellation Policy

Flight tickets are subject to restrictions. Depending on the type of tariff, cancellation or change fees apply. Such fees are imposed by the relevant service provider. Penalties vary from 0 to 100% of the selling price depending on the type of tariff. The rebooking and cancellation policy can be found on your personalised offer.

Official Carrier

AIDS 2010 has appointed the STAR Alliance as the Official Airline Network of the congress.



Please return to:
Email: flights@aims2010.org or
Fax: +41 840 20 20 10