Form 5, registration.

|  |  |
| --- | --- |
| Country |  |
| Contact person |  |
| E-mail |  |
| Telephone |  |

**Transfer 29th July and 3rd August.**

**Keflavik Airport (KEF) – Hotel - KEF**

|  |  |  |
| --- | --- | --- |
| Airport/Hotel |  | **Id: 431276-0629** |
| Nº Players |  | 1.121 Euros return pr/bus/pax 30-50 |
| Nº Accompanies persons |  |
| Total |  |
| Airline Company |  |
| Flight Number |  |
| Time of Arrival |  |
| Name of the Hotel |  |  |
| Hotel / Airport |  | **tel: +354 588 8660** |
| Nº Players |  |  |
| Nº Accompanies persons |  |
| Total |  |
| Airline Company |  |
| Flight Number |  |
| Time of Departure |  |
| Departure from Hotels | **Three Hours before the departure** |  |
| Name of the Hotel |  |  |

**Please email this form to** [sales@snaeland.is](mailto:sales@snaeland.is)**before mars 15th, 2024.**

**Each country is responsible for payments.**

**The company will send a payment link to the contact person/email above.**

**Payment is required before Apr 1st, 2024.**