

14th APNIC Open Policy Meeting
September 3-6, 2002
Kitakyushu International Conference Center

HOTEL RESERVATION FORM

Fax: +81-3-3591-8285

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Name: _____

Email: _____

Company Name: _____

Phone: _____

Fax: _____

DESIRED ACCOMMODATION

Hotel Name

Room Type: Single [] Twin (Rihga Royal only) []

Shared with:

Check In: September

Check Out: September

No. of Nights:

CREDIT CARD INFO

Credit Card: [] VISA [] MasterCard [] AMEX

Cardholder's Name:

Card Number:

Expiry Date: MM YY

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REPLY FORM

[] Your reservation is guaranteed as requested above.

[] Your requested hotel is fully occupied. We can offer you a room at the

_____ .

14th APNIC Open Policy Meeting Accommodation Desk
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