



## Cost Acceptance

HANSE Betriebsratsseminare GmbH  
Volkerweg 12  
22559 Hamburg  
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Date .....

*Please fill out this declaration and sign it. We will show it to the hotel and the bill will be sent directly to your employer.*

We confirm the acceptance for the costs, which result from the stay in the hotel (overnight stay/breakfast/dinner and conference package). Additionally we accept the costs for:

- Parking fees                       Tourist tax  
 Telephone costs                       Internet costs

### Company details

### Participant

Company Name	Last Name, First Name
Company Name (second line)	Last Name, First Name
Street, house number	Last Name, First Name
ZIP code, city	Last Name, First Name
Phone number	Topic
Fax number	Date (from - to)

### Billing address (if different):

Company name

Street, house number, ZIP code, city

Date/ Signatur employer/ Stamp

Name in block capitals