

## SPANGDAHLEM AB, GERMANY GROUP RESERVATION REQUEST

In order for us to make a group reservation we would need the following information.

Arrival Date:	D	eparture Date:	
Mission number: (required if you are flying in via	a Mil Air)		
Name of Group:			
Total # of guests:			
Unit/Organization:			
Unit/Organization Address:			
ZIP:	Base:		
Name of Group POC:			
Phone # of Group POC:			
E-Mail of Group POC:			
Please indicate what type of v	isit the guests will be	traveling for:	
Annual AFR/ANG Tour	Exercise	Aircrew	PAX
Community Center	Conference	Sports	РМЕ 🗌
Other:			

You may send this information by any of the following methods:

E-Mail: 52fss.fsvllodgingreservations@us.af.mil DSN FAX: (314) 452-5148 CIV FAX: 011496565615148 Please provide Rank, Name & E-Mail for all guests below: