

REGISTRATION FORM GUEST CONTRIBUTION

for contributing guests

Based on the statute on the collection of a guest contribution from the local community Rieden from 14.11.2017

Residential Operation/private Accommodation

Day of arrival	Day of expected departure

Notification requirement

1. _____	
Last name, first name	Date of birth

Street and house number

Postal code and city

Other passengers

2. _____	
Last name, first name	Date of birth

3. _____	
Last name, first name	Date of birth

4. _____	
Last name, first name	Date of birth

5. _____	
Last name, first name	Date of birth

6. _____	
Last name, first name	Date of birth

7. _____	
Last name, first name	Date of birth

8. _____	
Last name, first name	Date of birth

9. _____	
Last name, first name	Date of birth

10. _____	
Last name, first name	Date of birth

Travel groups

Tour operator, company	Number of people

Please tick if applicable

a) underage < 12 Years	b) severely disabled GdB > 50 %	c) companion
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Amount of people

_____	_____	_____	_____
			contributory

Date, signature (guest/tour operator)

Excluded from the payment of guest contribution are:

- a) Children and adolescents until completing the age of 12,
- b) Severely disabled persons whose degree of disability is at least 50 and the degree of disability is evidenced by a medical certificate, severely disabled persons card or pension certificate,
- c) Accompanying persons of severely handicapped persons, whose degrees is at least 50, if the necessity of the accompaniment is evidenced by a medical certificate.