

Request for Flight Offer

Please complete this form and let us provide you with a flight offer by email from your home airport to Vienna at the best available fare reflecting the Star Alliance Network discount.



Contact details

Ms Mr Prof PD Dr

Family name

First name

Institution / Company

Department

Street, No. / P.O. Box

Postal Code / Zip Code

City

State

Country

Email

Phone business

Phone home

Fax

Fields marked in red can be completed electronically

Requested flight itinerary:

Please note: The name cannot be changed after the booking is completed. Make sure that you enter the name the same way it is written in your passport to avoid problems at check-in or immigration.

Passenger 1: First name

Last name (Legal name)

Passenger 2: First name

Last name (Legal name)

Class of service requested: Coach/Economy Business (where available)

Preferred arrival itinerary to Vienna

Date

Departure time

From home city / airport:

Preferred return itinerary from Vienna

Date

Departure time

To home city / airport:

Frequent flyer membership:

Name of airline / alliance:

Number

Book your reduced ECCMID flight ticket online via
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