

REGISTRATION FOR ACCOMPANYING PERSON

Family name:..... First name:..... Title:.....

Conference reception: EUR 26/person

(Conference reception is included in the registration fee. For accompanying person it costs 26 EUR)

TO BE PAID

Conference registration: EUR.....
Hotel accommodation: EUR.....
Accompanying person: EUR.....
Post conf. excursion: EUR.....

TOTAL AMOUNT: EUR.....

METHOD OF PAYMENT: BANK TRANSFER

Bank account number (IBAN code): K& H Bank Rt. HU91 1020 1006 6020 2507 0000 0000

Swift code: OKHBHUHB

Address: 1051 Budapest, Arany János u. 20.

Description: "APCI07" and participant's name

If you prefer paying by credit card please contact the technical organisers! (kovacs.anna@congress.hu)

CANCELLATION POLICY

Cancellation until 1st of June 2007: no cancellation fee
Cancellation after 1st of June 2007: no refund of the registration fee
Cancellation should be made by fax or e-mail.

Date:

Signature:

Return to:

Congress Kft – Ms. Anna Kovács
H-1026 Budapest, Szilágyi E. fs. 79.
Phone: +36 1 212 00 56
Fax: +36 1 356 65 81
E-mail: kovacs.anna@congress.hu