

January 27-28, 2010

Registration Form

Attn: Georgia Dede
Fax No: 210 3633174

Registration Fees

Early Registration Fee – up to November 13, 2009

€ 390 (+ VAT 19%)

Late Registration Fee – after November 13, 2009

€ 460 (+ VAT 19%)

Student Fee (please fax a copy of your student ID together with a complete registration form)

€ 170 (+ VAT 19%)

Fees include all conference material, access to the conference rooms and the exhibition, refreshment breaks and lunch on each day of the conference.

PARTICIPANT'S DETAILS (please print clearly)

Full Name					
Position (Title)					
Company					
Bus. Tel.:		Mobile Phone:		Fax:	
e-mail address					

INVOICE DETAILS (please print the information exactly as they should appear on your company's invoice)

Name of Company			
Type of Business			
Address			
Postal Code		City	
VAT Nr.		VAT Office	
Contact Person for Payments		Tel:	

PAYMENT METHOD

Your registration is not complete until full payment is received. Full payment is due prior to the conference. Please select one of the following payment methods:

- ☐ Cheque payable to the HAU
- ☐ Deposit into one of the HAU bank accounts (please fax a copy of the bank slip to the HAU)
 Emporiki 20.501.740 [IBAN GR65 0120 0050 0000 0002 0501 740, BIC EMPOGRAA]
 Eurobank 0026-0012370100176525 [IBAN GR26 0260 0120 0003 7010 0176 525]
- ☐ Charge of credit card:
- Card Type Visa ☐ Master card ☐
- Card No.
- Card Expiry date
- Name of card holder Signature

CANCELLATION POLICY

A 50% refund will be given for cancellations received in writing by November 30, 2009. No refunds will be granted after this date, but we will accept a substitute attendee if we receive a note to transfer registration to a named individual.

The undersigned fully accepts the terms and conditions of this registration form

Name Signature Date

Confidentiality: The information you provide will be safeguarded by the Hellenic American Union, who may use it to keep you informed on relevant products and services. If you do not wish to receive such information by telephone ☐, fax ☐, e-mail ☐, or mail ☐, please check the appropriate box and fax this form to the Hellenic American Union, Fax nr: 2103633174 or notify the person in charge of sending this information. We will ensure that you do not receive any further information, unless you instruct us otherwise.