

REGISTRATION FORM

EPG PRAGUE 2004 Conference

May 20 – 22, 2004 • Michna Palace, Prague, Czech Republic

REGISTRATION DEADLINES: Early: March 4, 2004

TO BE FAXED TO: (+420) 267 310 503

OR MAILED TO: Action M Agency, Vrsoviccka 68, 101 00 Praha 10, Czech Republic

LAST NAME:		FIRST NAME:		MR/MS:	TITLE:
UNIVERSITY / COMPANY:					
FACULTY:			DEPARTMENT:		
STREET:			CITY:		
ZIP CODE:			COUNTRY:		
PHONE:			FAX:		
E-MAIL:			WWW:		
NAME OF ACCOMPANYING PERSON (S):					
SPECIAL NEEDS (VEGETARIAN, DISABLED ETC.):					
DATE (TIME) OF ARRIVAL:		DATE OF DEPARTURE:		Nº OF NIGHTS:	

PAYMENT

PAYMENT BY CREDIT CARD				PAYMENT BY BANK TRANSFER			
REGISTRATION FEES: Early: by March 5/Late: after March 5				<input type="checkbox"/> yes <input type="checkbox"/> no			
ISA MEMBER FEE: CZK 5 500/7 100				ISA MEMBER FEE: EUR 165/215			
ISA NO-MEMBER FEE: CZK 6 500/8 400				ISA NO-MEMBER FEE: EUR 195/255			
REDUCED FEE: CZK 5 000/ 6 600				REDUCED FEE: EUR 150/200			
ACCOMPANYING PERSON FEE:				ACCOMPANYING PERSON FEE:			
WELCOME PARTY: CZK 980				WELCOME PARTY: EUR 30			
WALKING TOUR FEE: CZK 390				WALKING TOUR FEE: EUR 12			
TOTAL:		CZK		TOTAL:		EUR	
CREDIT CARD DETAILS				Payment to be sent to the Czech Republic, Komerční Banka Praha 10, Milena Zeithamlova - Action M Agency, SWIFT: KOMB CZ PP, account EUR No. 7473400217/0100. Please make sure that the bank transfer is made net of all bank charges and commissions.			
VISA*		MASTERCARD/EUROCARD*		NAME OF THE PAYER:			
AMEX		JCB		NAME OF THE BANK:			
DINERS CLUB				ACCOUNT NUMBER:			
NUMBER:				DATE OF PAYMENT:			
LAST 3 DIGITS: <small>(on the signature strip - the reverse side)</small>							
EXPIRE:							
NAME ON CC:							
I, the undersigned, authorise the Action M Agency to charge to my credit card the total amount of _____ CZK							
YOUR SIGNATURE:							

Hotel BOOKING FORMS

Download from Accommodation page and fax it directly to the hotel. Please make your reservation ASAP since the number of rooms with a special rate is limited.

PRINT