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|  | **Registration Form** |

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| **[ ]** -Prof. **[ ]** -Dr.  | First name: |       | Last name: |       |

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| Postal addRess: |       |

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| City: |       | Country: |       | Postal Code:  |       |

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| Institution: |       |

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| Mobile:  |       | E-mail: |       |

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| **Registration Fees** | **by 15 July 2017** | **from 16 July 2017** |
| HAPS Members\* | [ ] 32.000 HUF | [ ] 42.000 HUF |
| Non HAPS Members\* | [ ] 52.000 HUF | [ ] 62.000 HUF |
| Exhibitors\* | [ ] 32.000 HUF | [ ] 42.000 HUF |
| Accompanying persons\*\* | [ ] 20.000 HUF | [ ] 20.000 HUF |

*In accordance with the Hungarian tax regulations, invoices will show the full registration fees divided into registration costs and catering costs (18.000 HUF).*

**\*Registration fees for participants (HAPS and Non HAPS Members,** **Exhibitors ) includes:** Admission to all scientific sessions**,** Congress material (final program etc.)**,**Admission to the trade exhibition**,** Admission to the Welcome Reception on 14th September 2017,Lunch on 15th September 2017,Coffee breaks  **\*\*Registration fees for Accompanying persons includes:** Admission to the Welcome Reception on 14th September 2017**,** Lunch on 15th September 2017; **Accommodation is not included in the registration fee.**

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| **Optional programme** |  |
| Conference Dinner in Tisza River Cafe Club (15 Sept;8.000 HUF/pers) | I am ordering the conference dinner for       person. |
| Lunch in Hunguest Hotel Forrás (16 Sept; 4.500 HUF/pers) | I am ordering the lunch for       person. |

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| **Accomodation** |

[ ]  I don’t need an accommodation during the congress.

[ ] I am ordering my accommodation between 2017.       -      for       nights for       person/s in the following hotel:

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| Hotel *Room rate includes: Buffet breakfast, VAT, City Tax, usage of Fitness & free WIFI.* | Room with breakfast/night |
| single room | double room |
| **Hunguest Hotel Forrás\*\*\*\*** standard room | [ ]  - 26.000 HUF | [ ]  - 35.400 HUF |
| **Tisza Sport Hotel** superior room | [ ]  - 11.400 HUF | [ ]  - 16.900 HUF |

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| I share my room with my | [ ]  - colleague [ ]  - accompanying person:  |       |

A) I pay **[ ]** registration fee, **[ ]**  accomodation as individual with bank transfer

B) **[ ]** Registration fee, **[ ]**  accomodation is payed by my workplace, sponsor, other establishment.

Represent the (establishment) name below on my invoice:

|  |  |
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| (Establishment)name: |        |

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| Postal address: |       | EU VAT: |       |

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| City: |       | Country: |       | Postal Code:  |       |

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| Administrator name: |       | E-mail: |       |

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| Any special request: |       |

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| Where should we send the invoice? | **[ ]**  | - | to the sponsor | **[ ]**  | - | to your postal address |

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| Date: |       | Signature |       |

**Cancellation deadline: 14 August 2017**