**REGISTRATION FORM**

Please fill in the form and send it to Congress Ltd., in email (imekotc10@congress.hu)

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**1 ) PERSONAL DATA (Please, print or type)**

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

Title:...................................................................... Gender: male female

Institution/Office:...........................................................................................................................................................

Street:................................................................................................................................................................................

ZIP Code:................................................................City:.................................................................................................

Country:...........................................................................................................................................................................

Phone:................................................................................Email:....................................................................................

***Invoicing address (if different from above)***

Company name:............................................................................................................................................................

Street:...................................................ZIP code:........................City:..........................................................................

Country:...........................................................................................................................................................................

European Union VAT number:.......................................................................................................

**2) REGISTRATION FEE (**✓**Please tick)**

Acknowledgement of registration will be sent after receiving your payment.

|  |  |  |  |
| --- | --- | --- | --- |
|  **(reverse charge for EU VAT nr, 0% VAT for third countries, + 27% VAT for individual and Hungarian participants)** | **Early (before 28 June 2019)** | **Regular (between 29 June and 18 August 2019)** | **Late****(after 19 August 2019)** |
| **REGISTRATION FEE** | **□ 350 EUR** | **□ 400 EUR** | **□ 450EUR** |
| **STUDENT FEE** | **□ 180 EUR** | **□ 220 EUR** | **□ 280 EUR** |
| **EXTRA PAPER FEE** | **□ 50 EUR** | **□ 50 EUR** | **□ 50 EUR** |

*Cancellation of registration must be submitted in writing via fax or email. Cancellations received before 28 June 2019 are subject to a 20% administrative fee. No refunds will be paid after 28 June 2019 but delegate substitution is permitted.*

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**THE REGISTRATON FEE FOR PARTICIPANTS AND STUDENTS INCLUDES:**

Participation in the scientific program

Access to the Conference Banquet

Coffee, refreshment and lunch in the breaks during the conference days

Conference Bag,

Proceedings on USB stick

**3) PAYMENT METHOD**

|  |  |
| --- | --- |
| ❑ **CREDIT CARD PAYMENT**I authorise Congress Ltd. to charge the IMEKO TC 10 (2019) registration fee to the credit card listed below.EUR **....................**  ❑ EuroCard/MasterCard ❑ VisaCard number Expiration date (mm/yy) CVV code *(Last 3 digits of the security code on the back side of the card)*Cardholder’s name: Cardholder’s address:   Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cardholder’s signature:  | ❑ **BANK TRANSFER**Beneficiary's name: Congress Ltd.Erdő u.66, BUDAKESZI, H-2092 HUNGARYIBAN:HU 91 1020 1006 6020 2507 0000 0000Bank name: K&H Bank Rt.Bank address: Arany J. u. 20., BUDAPEST,H-1051 HUNGARYSWIFT Code: OKHBHUHBVAT no.: HU10313657While making the bank transfer please do not forget to indicate “IMEKO TC10” and the participant’s name. Payments sent by bank transfer must be free of charges for Congress Ltd.Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature  |

I, the undersigned, certify to have read and agree the above mentioned conditions concerning registration, payments, cancellation and refunds.

Date:………………………………..……...Signature:……………………………………..……..........