

REGISTRATION FORM

- Please use block letters -

Title*: Prof Dr / Ms Mrs Mr

Family name*:

First name*:

Institution/Company*:

Department:

Address:

City*:

Postal code:

Country*:

Telephone:

Email:

Accompanying People (non-participants)

1. Family name*:

First name*:

2. Family name*

First name*:

* To be printed on name badge

REGISTRATION FEES:

Please tick the appropriate box

	<i>Before April 10th, 2017</i>	<i>After April 10th, 2017</i>
<input type="checkbox"/> Full registration	<input type="checkbox"/> 370 Euros	<input type="checkbox"/> 450 Euros
<input type="checkbox"/> SECyTA Members	<input type="checkbox"/> 330 Euros	<input type="checkbox"/> 410 Euros
<input type="checkbox"/> Students ¹	<input type="checkbox"/> 230 Euros	<input type="checkbox"/> 300 Euros
<input type="checkbox"/> One-day ticket	<input type="checkbox"/> 200 Euros	<input type="checkbox"/> 230 Euros
<input type="checkbox"/> Accompanying people	<input type="checkbox"/> 120 Euros	<input type="checkbox"/> 120 Euros

WILL YOU ATTEND THE WELCOME COCKTAIL AND/OR THE GALA DINNER?

WELCOME COCKTAIL (Free)

YES

NO

GALA DINNER ² (20 €)

YES

NO

TOTAL AMOUNT TO PAY:

€

¹ Proof of student status is required (e.g. copy of current University student I.D.)

² Excluding accompanying people

PAYMENT

Bank transfer, please transfer the amount to:

ABANCA, Rúa Concheiros, 45, 15703 Santiago de Compostela (Spain);

Bank Account Number (IBAN) N° ES07 2080 5540 3831 1000 3773

Bank Identifier Code (BIC) CAGLESMMXXX

With the following reason of transfer: *Registration fee **ExTech** 2017 "NAME" "FAMILY NAME"*.

Please return this form to the following e-mail, with a copy of the bank transfer.

E-mail: registration@extech2017.es

PLEASE REMEMBER TO MAKE A PHOTOCOPY OF THIS FORM FOR YOUR OWN RECORDS!