REGISTRATION FORM Return by April 20, 2016 to:

CIMTEC Corso Mazzini, 52 48018 FAENZA ITALY Fax +39 0546 664138 - E-mail: congress@technagroup.it

	пир://2016.С	imtec-congress.or	rg/ommereg	j
Family Name		First Name		
INVOICING DETAILS:				
Institute / Company				
Full Address				
Postal Code	City	(Country	
Phone	Fax		E-mail	
VAT Number				
Tax Code / Tax Identification Nur	nber			
REGISTRATION FEES* (EUR)		Early (by April	20)	Late and On Site
Full Member**		☐ 710.00 EUI	R	☐ 770.00 EUR
Student***		☐ 430.00 EUI		☐ 490.00 EUR
Invited Lecturer (IL)****		☐ 355.00 EUI	R	☐ 420.00 EUR
* Payment can also be made in US ** Authors of Contributed Lectures *** Evidence of student status mu **** and/or Member of Advisory B	(L) and Posters (P) st accompany the re	, other participant	•	ayment is made
Early fee is applicable only if both	registration and p	ayment are receiv	ved by April	1 20
I confirm attendance in the fo Welcome Party (□ June 6)	llowing complime Jazz Concert (□	•	•	se) Jinner (□ June 9)
	Jazz Concert (June 8) Co	•	•
Welcome Party (☐ June 6)	Jazz Concert (NLY if you are a Pre	June 8) Co	onference D	inner (□ June 9)

COMPANION/S	Family Name	First Name				
	Family Name	First Name				
	Family Name	First Name				
Companions Programme	Early (by April 20)	Late and On Site*				
Persons No x 270.00 EUREUR No x 290.00 EUREUR						
* On site registration is subject to availability of places						
Inscription to Companions Programme does not allow to attend technical sessions						

SUMMARY OF FEES		
Registration Fee (Full Member)		EUR
Registration Fee (Student)		EUR
Registration Fee Invited Lecturer or/and CIMTEC 2016 Advisory Board Member		EUR
Registration Fee (Companion/s)		EUR
	TOTAL	EUR

PAYMENT (to be made *net of all charges* in EUR or equivalent in US\$)

Payment of _______EUR / US\$ is being made:

By bank transfer made payable to:
Techna Group SrI, Cassa di Risparmio di Cesena SpA, 505 Filiale Faenza 1
SWIFT: CECRIT2CXXX

IBAN: IT58 Q061 2023 705C C505 0002 852 DESCRIPTION: CIMTEC 2016 and Participant Name (please enclose copy of the bank transfer)

☐ I will pay on-site (on-site payment to be made by cash only)

NOTE: USE A SEPARATE FORM FOR EACH INDIVIDUAL REGISTRATION