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ARTeMIS User Training Course, October 4-5, 2007

= Registration Form =

Deadline: August 15, 2007

Please print or type (One registration per person)

First name | Last/Family Name

Company/University

Address

City | State/country | Postal code

Phone | E-mail | Fax

Accommodation **(Special rates at** Helnan Phoenix Hotel **when reserved through SVS). Deadline: August 15.**

		Single	Double
☐	Number of rooms (*includes breakfast*)	~ 115 €	~141 €
	Total		

Check-in ☐ Check-out ☐ Smoking or non-smoking room **S** ☐ **N-S** ☐

Payment **(please indicate how many participants will attend)**

		EUR		EUR
☐	Course fee (*includes lecture notes, lunch and refreshments*)	400	Students	200
	Total			

Form of payment **(please indicate credit card type)**

☐ Mastercard ☐ Visa ☐ Please send written confirmation

Card no. | Control no.*

***) The control no. is the last 3 digits found on the back of your credit card**

Expiration date: _____
Month Year

Signature: _____

Please send the completed registration form by **mail** or **fax** to:

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