

REGISTRATION FORM

PLEASE SEND THIS FORM BY FAX OR E-MAIL TO:
 Viajes El Corte Inglés • Princesa, 47 4ª planta • 28008 Madrid • España
 Phone : + 34 91 204 26 00 ext. 1140• E-mail: opodis2016@viajeseci.es

PERSONAL DATA:

Last Name: _____ Name: _____
 Institution: _____
 City: _____ Zip Code: _____ Country: _____
 E-mail _____ ID /Passport: _____
 Phone: _____ Fax: _____

Registration fees for the 20th OPODIS 2016 Conference

This rate covers:

- Conference attendance
- Welcome reception
- Conference kit
- Electronic copy of the proceedings
- Lunches and coffee breaks (Dec. 13th-16th)
- Access to the banquet

	Early (until Nov. 16th (until Nov. 21 st)	Late (Nov. 22 nd – Dic. 5 th)	On-Site (from Dic. 6 th)
Regular registration fee	650 EUR	750 EUR	800 EUR
Student registration fee	300 EUR	400 EUR	800 EUR

PAYMENT METHOD:

- BANK TRANSFER (free of charges)** for the receipt to "Viajes El Corte Inglés, S.A."
 BANCO BILBAO VIZCAYA ARGENTARIA • I.B.A.N.: ES 97 0182 3999 3702 0066 4662 – B.I.C.: BBVAESMMXXX
 Ref.: OPODIS 2016 + surname.
 Please send us the bank transfer copy, by e-mail: opodis2016@viajeseci.es

 CREDIT CARD

VISA Master Card American Express Diners Club 4B

CREDIT CARD HOLDER: _____ PASSPORT NUMBER: _____

CREDIT CARD NUMBER: _____

EXPIRATION DATE: ___ / ___ (MONTH/ YEAR)

AUTHORIZE THE CHARGE OF: _____ €

DATE: ___ / ___ / ___ (DAY/ MONTH/ YEAR)

IN CASE YOU REQUEST AN INVOICE, PLEASE FILL IN:

Credit Card Holder Signature
(Mandatory)

COMPANY NAME: _____ CUSTOMER VAT NUMBER: _____
 POSTAL ADDRESS: _____ ZIP CODE: _____
 CITY: _____ COUNTRY: _____