

REGISTRATION FORM

PLEASE FAX TO +32 2 646 64 60

**BOXING
THE
FUTURE.**
FEFCO
Summit
Barcelona

FEFCO Summit registration fees (excl. VAT)

- 890 €*** - Early bird rate (registrations made before 15th February 2010);
- 990 €*** (registrations made as of 16th February 2010);
- 400 €*** - Group discount (as of 11th participant in groups of more than 10 delegates of the same company – please contact FEFCO for a Group Registration Form: + 32 2 646 40 70 - info@fefco.org).
- 250 €*** - Young professional (participants under 30 years old);
- 100 €** - Partner Ticket (including Welcome Cocktail & Get-Together dinner);

* Full access to Summit including lunches, coffee breaks, the welcome cocktail hosted by AFCO on 21st April and the get-together on 22nd April.

FEFCO Summit Events

Wednesday 21st April 2010

I will attend the welcome cocktail hosted by AFCO from 19:30-21:00

Yes

No

Number of persons attending the welcome cocktail: _____

Thursday 22nd April 2010

I will attend the Get-Together dinner as of 20:30

Yes

No

Number of persons attending the Get-Together dinner: _____

FEFCO Summit Cancellation policy

Only cancellations in writing & faxed to FEFCO (+32 2 646 64 60) will be accepted & refunds will be as follows:

- 50 % refund for cancellations before the 15th March 2010;

- No refund for cancellations received after the 16th March 2010 or in the event of a no-show.

N.B.: Anyone unable to attend may be replaced by a colleague anytime. However, FEFCO need be kept informed in writing.

Contact details

Mr. Mrs. Ms.

First name: _____ Last name: _____

Function: _____ Company: _____

Address: _____

Postal Code: _____ City: _____ Country: _____

Direct phone #: _____ Direct fax #: _____

Email*: _____ Company VAT #: _____

Invoicing details (if different from above): _____

* All related communication will be by email.

Payment options

Credit card

I authorize FEFCO to charge my credit card for the total amount + 16 % VAT= _____ €

Signature / Date: _____

Credit card: Visa MasterCard

Credit card holder: _____

Credit card #: _____ Expiry date (mm/yy): _____

Bank transfer (FEFCO will send an invoice with all bank details)

Date and place : _____ Signature : _____