Conference Registration Form
University of Lisbon

First Name:
Last Name:
Address:
City: Zipcode: Country:
E-mail:
Phone:
Fax:

Receipt Info
Billed to:
Address:
Zip/Postal Code:
Country:
VAT number:
(Reception of registration will be acknowledged by iris@clul.ul.pt)

Conference fees
Payment by bank transfer
[ ] Regular fee: € 375 euros
[ ] Student fee: € 275 euros
Payment by credit card
[ ] Regular fee: € 385 euros
[ ] Student fee: € 282 euros

This includes attendance at all colloquium sessions, Conference Pack including Proceedings, colloquium dinner, 2 lunches, and coffee and refreshments during the breaks. Full time students are asked to enclose a copy of a document confirming their status.

Bank Transfer
In case of paying by bank transfer, please enclose a copy of the transfer order form. Send the bank transfer (with all charges supported by the sender) to:

Bank details:
Account holder: Fundação da Faculdade de Ciências da Universidade de Lisboa
Account number: 0840 1919 0000 (only for transactions within Portugal)
IBAN: PT50 0007 0084 0001 9190 0001 2 (international transactions)
BIC/SWIFT code: BESCPTPL
Bank name: BES – Banco Espírito Santo
Bank address: DMI - Av. Da Liberdade, nº 195, 1250-142 Lisboa
Reference: Name, DAARC2011

Credit Card
I authorise the amount of __________ Euros to be charged on my credit card.
[ ] Visa [ ] Mastercard (We can only accept Visa or Mastercard.)

Credit Card Number: ____________________________
CVV (3 rightmost digits on the back of the card):
Exp Date: __________ Card Holders' name: __________________________
Signature:
Registration

Send this registration form by Fax to the University of Lisbon, Fundação da Faculdade de Ciências
Fax. +351 21 750 01 66
To: Sr. Humberto Coito
Subject: DAARC2011

For more information please contact Iris Hendrickx at: iris@clul.ul.pt

For this registration to be complete, the Accomodation Form 2/2 has also to be received by Hotel Faro.