



REGISTRATION FORM

EGEA 2010

PLEASE RETURN WITH PAYMENT TO:

May 5th-7th 2010 – Brussels
 CCAB – Centre Albert Borschette
 36, rue Froissart B-1040 Brussels

APRIFEL
EGEA 2010
 60, rue du Faubourg Poissonnière
 75010 Paris – France

With the participation of the European Commission
 With the support of the French Ministry of Agriculture

Fax : +33 (0)1 49 49 15 16

Fees

Table 1

	Registration fee Before April 30 th 2010	On-Site Registration NO LONGER POSSIBLE
Delegates	420 €	620 €
Students*	120 €	190 €

* Your student card will be requested at the entrance

Registration fees include:

- Admission to symposia, poster session and exhibition area.
- Congress bag, containing the final programme and abstract book.
- Opening cocktail.
- Conference refreshment breaks.
- Conference lunches.

Additional information:

- Upon registration form, an acknowledgement of receipt will be sent.
- Registration will be definitive once the payment is received. Early registration deadline is **April 15th, 2010**. On-site registration will be possible.
- However we strongly recommend the participants to take advantage of the early registration process.
- Cancellation of registration has to be made in writing to the summit secretariat "APRIFEL - Service Inscriptions EGEA 2010" - 60 rue du Faubourg Poissonnière 75010 Paris.
If cancellation is received before **April 5th 2010**, reimbursement of the registration fees, minus Euro 50 handling charges, will be made.
- After **April 15th, 2010** or if participants fail to attend, no refund will be paid.

Accommodation and transport: www.egeaconference.com

PAYMENT

Mr.

Ms.

Last Name*:

First name*:

Position (Dr, Pr, PhD ...):

Company/Organization/University:.....

Address*:

City*:

Zip*:

Country*:

Telephone*:

Fax:

E-mail*:

* Required Fields / Capital letters

Kindly select your presence for each day:

(Detailed program: www.egeaconference.com)

Table 2

	ATTENDANCE	COCKTAIL	LUNCH
May 5 th	<input type="checkbox"/>	<input type="checkbox"/>	
May 6 th	<input type="checkbox"/>		<input type="checkbox"/>
May 7 th	<input type="checkbox"/>		<input type="checkbox"/>

Amount: Euros (See Table 1)

PAYMENT METHOD

Euro Cheque to the order of APRIFEL (For France only)

Bank transfer:

Account holder: APRIFEL - 60, rue du Faubourg Poissonnière – 75010 Paris – France

Bank details: **CREDIT DU NORD** HAUSSMANN GRANDS INSTITUTIONNELS
50, rue d'Anjou, 75008 Paris – France

IBAN (International Bank Account Number)							BIC (Bank Identifier Code)
FR76	3007	6023	5211	8237	0020	029	NORDFRPP

Domiciliation	Code banque	Code guichet	Numéro de compte	Clé RIB
CREDIT DU NORD AG INSTITUTIONNELS	30076	02352	11823700200	29

FOR FASTER AND EASIER HANDLING OF YOUR REGISTRATION,
USE THE WEBSITE: www.egeaconference.com.
In that case, please do not send the form.

