



Registration Form

INFORMATION ABOUT THE PARTICIPANT

Name and surname of the participant:

Affiliation:

E-mail:

Telephone:

Fax:

FOR TAX PURPOSES

Organisation:

Address:

Town/city and postcode:

Country:

Passport number or VAT number:

REGISTRATION FEES

Scientific registration fee*	Euros (VAT included)	amount	TOTAL (€)
Before July 1, 2015 - student	100.00		
Before July 1, 2015 - senior	130.00		
After July 1, 2015 - student and senior	200.00		
Social event: Activity and dinner in the Museu de la Xocolata. Registration is mandatory before the Congress (limited numbers!) Also available for accompanying persons .	35.00		

*It includes access to conference and poster sessions, programme booklet, abstracts, coffee breaks and Friday lunch.

METHOD OF PAYMENT

By **BANK TRANSFER**, in the name of Fundació Bosch i Gimpera - UB, Vat Number: ESG08906653.
Bank details: Bank Code: CAIXESBBXXX; Iban Code: ES17 2100 5000 54 0200039821

When making the transfer please specify the name of the participant, the name of your organisation and the reference number **FBG308071**, wherever possible.

Send the **REGISTRATION FORM** and **A COPY OF THE TRANSFER**, to the following e-mail address cocoamed2015@gmail.com indicating the name of the participant in the subject.