



ATHENS SYMPOSIUM

13-16 April 2005

REGISTRATION FORM

TO BE RETURNED TO

CIGRE, 21 rue d'Artois, F 75008 PARIS

Tel : + 33 (0)1 53 89 12 90 Fax : + 33 (0)1 53 89 12 99

E-MAIL : registrations@cigre.org

Greek Nationals register with : CIGRE Greek NC,
NTUA/ICCS 9, Iroon Polytechniou str., ATHENS 15773

Tel : + 30 210 7722888 Fax: + 30 210 7723586

E-mail : vcos@power.ece.ntua.gr

Registration and
payment are
accepted until
April 1st
After this date
registration and
payment will be
on arrival only

FAMILY NAME :

First Name :

Company, functions, full address :
(including country)

e-mail: Fax:

(include town and country codes) Telephone :

My CD-ROM of papers is to be sent by post

☐

I will collect my CD-ROM of papers on arrival at the Symposium

☐

I will take part in the Welcome Cocktail

☐

person(s)

I will take part in the dinner

☐

person(s)

Tourist-Technical Visit (16 April)

☐

person(s)

PAYMENT

■ REGISTRATION FEE

Membership No.

Member 300 €

☐

Non-member 350 €

☐

Accompanying Person(s) 50 €

☐

TOTAL €

PAID:

- by check drawn on a bank domiciliated in France
- direct to Greek National Committee (*Greek Nationals only*)
- by one of the Credit Cards below (*no others accepted*)

☐☐☐

MASTERCARD ☐ EUROCARD ☐ VISA CARD ☐

For
office
use only

Check

☐

Credit
card

☐

Cash

☐

Card No.

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Expires on : ____ / ____

Last 3 figures on reverse of card

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Name of card holder if different from above :

Invoicing address if different from above:

(Invoice will be sent upon receipt of the payment)

DATE AND SIGNATURE COMPANY STAMP

Cancellation policy : your registration form is an order form. Registration can be cancelled until April 1st.
Registration fees will be refunded, less 50 € for costs of processing.

According to the French Law 78-17 of 06/01/78 you have the right to access and rectify the above information concerning you. Unless we receive written opposition from you, this information may be accessible to third parties.