

SOTAMA'2007

Registration Form

Family Name			
First Name			
Position/Title	Sex (M, F)		
Company/Institution			
Address			
Postal Code	City		
Country			
E-mail			
Phone	Fax		
Institutional www	Personal www		

Accompanying person (not participating in scientific programme)

Family Name			
First Name			

If you have more accompanying persons or if a separate room is needed, mail this information to conference secretary or write it to Comments

Arrival date:	September	Departure date:	September
Note or additional wishes related to accommodation			

Payment

All payments payable to SOTAMA-FGM should be sent to:

**Institute of Metallurgy and Materials Sciences PAS,
Reymonta 25, 30-059 Krakow, Poland,
fax: +48-12-637 21 92**

Payment for conference SOTAMA'2007.

Please indicate which of the following means of payment you are using.

(In case of cheques and bank transfers, please cover the banking charges)

Personal or bank cashier's cheque for _____ \

(please indicate SOTAMA'2007)

Bank transfer of _____ \ to:

Account No. **PL 46 1060 0076 0000 3200 0046 8193**

Bank Code: **SWIFT: BPH KPL PK**

Holder of Account: **Institute of Metallurgy and Materials Sciences PAS**

NAME and **BPH PBK S.A. O/Krakow**

FULL Address **Pijarska 1**

of Bank Branch: **31-015 Krakow, Poland**

(please indicate SOTAMA'2007; don't forget to bring your copy of a document confirming that the payment has been done)

Credit card

Please debit my card _____ (name of a card)

For _____ \

Card number ____/____/____/____ Valid till ____/____ (month/year)

Name of cardholder: _____

Billing address: _____

Signature _____ Date _____

Date:

Signature:

Registration fee

Fee category		Before 1 st July 2007	Choose option(s)	After 1 st July 2007	Choose option(s)
Delegates (Standard fee)	accommodation included	360,- \		410,- \	
	no accommodation	260,- \		310,- \	
Students (Reduced fee)	accommodation included	220,- \		270,- \	
	no accommodation	160,- \		210,- \	
Accompanying person		50,- \		100,- \	
Exhibition payment		500,- \		550,- \	
<i>SOTAMA</i> Dinner		40,- \		40,- \	
Total payment:				,- \	,- \

Cancellation of registration

- All cancellations should be made in writing by fax (+48 12 637-21-92) or e-mail and sent to Ewa Beltowska (nmbeltow@imim-pan.krakow.pl)
- 100% refund of the conference fee is possible (minus banking charges) before May 15, 2004
- Your payment less than 100 Euros will be reimbursed, if a cancellation is received after May 15, 2004

Please, send the filled payment form by
 e-mail: **leszek.tarkowski+sotama@gmail.com** or by
 fax: **+48 12 6372192**