



JULY 9TH, PRE-CONFERENCE COURSE - REGISTRATION FORM

To be received **before 28/06/2002** to :
 ENS de CACHAN – Formation Continue et Développement
 61 avenue du Président Wilson – 94235 Cachan cedex / France
 Tél. +33 1 47 40 27 94 – Fax. +33 1 47 40 24 55 – colloque@fcd.ens-cachan.fr

Registration is completed by sending both form and payment before June 28, 2002.
 Other registrations may be accepted on July 9th (cash and cheque payment in € - euro - only)

PERSONAL DATA

Mrs. Ms. Mr.

NAME¹ : Surname¹ :

Title, Function :

Institution¹ :

Department¹ :

Address :

Zip Code : City :

Country¹ : Tel. :

E-mail¹ : Fax. :

Information printed on the attendants' list

REGISTRATION

Sur convention de formation continue (only for French firms)

Please tick the appropriate box

	Registration Before 28 th of June 2002
Pre-conference registration / REGULAR FEE (in euro)	<input type="checkbox"/> 180 €
Pre-conference registration / STUDENT'S FEE (in euro) (please join a copy of the student's card to this form)	<input type="checkbox"/> 90 €

- Registration fee includes access to the course, documents related to the course, Coffee-breaks and lunch.
- Cancellations with refund will be admitted till 10th of June. Each cancellation (required only by fax) will be charged a 20 € fee.
 AFTER 10TH OF JUNE REFUNDS WILL NOT BE POSSIBLE. Registration may be transferred to another person without extra cost.

MEANS OF PAYMENT

- CHEQUE** (ONLY IN € - euro - to be sent with this form to the benefit of "Agent comptable de l'ENS Cachan")
- BON DE COMMANDE** (only for French institutions)
- CASH** (ONLY IN € - euro - payment at the registration desk – considered as "late registration")
- BANK TRANSFER** (please join a copy of the order of transfer to this form)

TRANSFER FROM FRANCE

Name of the bank : **TG VAL DE MARNE**
 Account nb. : **40071 94000 00003000110 81**
 Owner of the account : **Agent Comptable de l'ENS CACHAN**
 Please don't forget to mention the following reference : **SHM 2002** and "**Your full name**"

TRANSFER FROM ABROAD

Name of the bank : **BANQUE DE FRANCE** Swift code : **BDFEFRPPXXX**
 IBAN : **FR38 3000 1009 0700 00E0 5505 708**
 Account nb. : **40071 94000 00003000110 81**
 Owner of the account : **Agent Comptable de l'ENS CACHAN – TG VAL DE MARNE**
 Please don't forget to mention the following reference : **SHM 2002** and "**Your full name**"

TRAVELLER CHEQUES AND CREDIT CARDS CANNOT BE ACCEPTED

Date : Signature :