



TECHNICAL EXHIBITION / BOOKING 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
Booking is completed by sending both form and payment before June 28, 2002.

ORGANIZATION

Institution / Company :

Product description :

Department :

Address :

Zip Code : City :

Country : web site :

FIRST EXHIBITOR

Mrs. Ms. Mr.

NAME :

Surname :

Function :

Tel. :

Fax :

E-mail :

SECOND EXHIBITOR

Mrs. Ms. Mr.

NAME :

Surname :

Function :

Tel. :

Fax :

E-mail :

REGISTRATION

Please tick the appropriate box

	Booking fee (in euro) To be sent before 28 th of June 2002
SHM 2002 Exhibition (2 exhibitors)	<input type="checkbox"/> 600 €
SHM 2002 Exhibition (one exhibitor)+ Conference (one attendant) Name of the attendant :	<input type="checkbox"/> 770 €

- Registration fee includes : a stall (width 2.4 to 3.6m, depth 2 to 3.2m), table and chairs, electric power plug (220V), one proceedings book, the attendants' list, coffee-breaks and lunches for 2 people, Insurance (theft, damage by a third party), link on conference's web site to the firm's page.
- Cancellations with refund will be admitted till 10th of June. Each cancellation (required only by fax) will be charged a 60 € 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)
- 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 :