



## CONFERENCE REGISTRATION FORM IRUG10

Please complete and return this form by e- mail to [IRUG10BCN@ub.edu](mailto:IRUG10BCN@ub.edu)

### Participant

Surname: \_\_\_\_\_ First name: \_\_\_\_\_ Title: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
Country: \_\_\_\_\_ ZIP code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
e-mail: \_\_\_\_\_

### Registration fees

Conference Registration Fees	Before January, 15	After January, 15	
Professional	190	220	
Student	80	110	
Lunches	20		
Conference dinner	40		
Accompanying person Conference dinner	40		
<b>Total fees submitted with this form (euro)</b>			

### Invoice details

VAT code: \_\_\_\_\_

**Fill out this box if your invoice address is different from the Registration address**

Invoice address: \_\_\_\_\_

### Payment by Bank Transfer to:

Av. Diagonal, 645 Adm. Centre Física I Química - 08028- Barcelona, SPAIN

NIF/VAT: ES - Q0818001J

IBAN: ES21 2100 3642 1622 0011 3323

BIC/SWIFT: CAIXESBBXXX

**¡INCLUDE IRUG10 AND YOUR FULL NAME ON THE STATEMENT!**