

**REGISTRATION FORM**

*please send this form to MikaTravel*

For further information regarding the registration please contact: Mrs Eva Gouvianaki - MikaTravel

**Email:**  congress@mikatravel.eu **Tel.**: + 30 2810223356

|  |
| --- |
| Mr /Mrs Last Name/First Name:  |
| Affiliation: |
| Tel.:  | Mobile:  |
| e-mail:  |

**REGISTRATION FEES**

**Registration fee (VAT not included): 200€** [ ]

***Includes:******Catering & Certificate of Attendance***

**METHOD OF PAYMENT**

**By Bank transfer to the order of DIMITRA MYKONIATI – MIKA TRAVEL**

(please enclose a copy of the bank transfer. Please state your name and Congress title on the bank transfer)

**EUROBANK ERGASIAS**

IBAN:**GR4902600200000110201259910**

BIC: **ERBKGRAAXXX**

Account Name : Dimitra Mykoniati (Mika Travel)

**If you wish to pay by credit card, please contact us.**