

Photonics Prague 2005·REGISTRATION FORM

June 8 - 11, 2005 • Olympik Hotel Prague • Czech Republic

REGISTRATION DEADLINES: Early: April 15, 2005 & Late: June 1, 2005

TO BE FAXED TO: (+420) 267 310 503

OR MAILED TO: Action M Agency, Vrsovicka 68, 101 00 Praha 10, Czech Republic

LAST NAME:		FIRST NAME:		MR/MS	
UNIVERSITY / COMPANY:					
FACULTY:			DEPARTMENT:		
STREET:			CITY:		
ZIP CODE:			COUNTRY:		
PHONE:			FAX:		
E-MAIL:			WWW:		
NAME OF ACCOMPANYING PERSON (S):					
SPECIAL NEEDS (VEGETARIAN, DISABLED ETC.):					
DATE (TIME) OF ARRIVAL:		DATE OF DEPARTURE:		Nº OF NIGHTS:	
Photonics Prague 2005 REGISTRATION FEES: (July 8 - 11, 2005)				PAYMENT BY BANK TRANSFER	
				YES	NO
Early: by April 15 / Late: after April 15 / On Site: after June 1		EUR	CZK	By bank transfer: Payments may be made in Euros or Czech Crowns. Please transfer the payment to the account most convenient for you. (Czech Republic, Komerční banka, Prague 10 – Kubánské nám. 15, account name - Milena Zeithamlova, Action M Agency) Swift Code: KOMBCZPP EUR Account No. 7473400217/0100 IBAN:CZ3601000000007473400217 CZK Account No. 221442-101/0100 IBAN:CZ0801000000000221442101	
EOS, SPIE Member*		EUR 380/420/460 CZK 12 150/13 450/14 700			
*CSSF Grant Applicant (approved)		EUR 150/150/150 CZK 4 800/4 800/4 800			
Regular		EUR 430/470/510 CZK 13 750/15 050/16 300			
Student**		EUR 180/220/260 CZK 5 750/7050/8 300			
**CSSF Grant Applicant (approved)		EUR 30/30/30 CZK 950/950/950			
Accompanying Person		EUR 110/110/110 CZK 3 500/3 500/3 500			
3 lunches (Thursday, Friday, Saturday)		EUR 24 CZK 750			
Sightseeing Tour (Wednesday)		EUR 16 CZK 500			
Photonics Prague 2005 ACCOMMODATION in Olympik hotel:					
Accommodation Deposit		EUR 100 CZK 3 200		For Single Room:	
				EUR 94/CZK 3 000	YES NO
				EUR 84/CZK 2 700	YES NO
TOTAL:		EUR CZK		For Double Room:	
				EUR 114/CZK 3650	YES NO
				EUR 106/CZK 3 400	YES NO
PAYMENT BY CREDIT CARD		YES	NO	Olympik hotel **** *** Non-Smoking room:	
VISA	MASTERCARD/EUROCARD		AMEX		DINERS CLUB
				EXPIRY DATE:	
LAST 3 DIGITS:		(on the signature strip - the reverse side)		CC HOLDER NAME:	
I, the undersigned, authorise the Action M Agency to charge to my credit card the total amount of _____ CZK that unless I have cancelled my hotel reservation in writing by May 4, 2005 to charge the accommodation balance due after that date.				CC HOLDER SIGNATURE:	