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Registration Form
HEARING IN THE ELDERLY

The First International Congress on Gerontological/Geriatric Audiology (1st ICGA)
6-9 June, 2004, Stockholm, Sweden

You can also register on-line: www.stocon.se/icga2004

Please print your name below!

Family name: _____
First name: _____ Title/Profession: _____
Institution/Organisation/Company: _____
Mailing address: _____
Postal code _____ City _____
Country: _____
Telephone: _____ Telefax: _____
(Country code - area code - number) (Country code - area code - number)
E-mail: _____
Special dietary requirements: _____ (800)
Accompanying person(s): _____ (035)

Due to Swedish tax legislation, participants from different countries may or may not have to pay VAT on the registration fee. Therefore, please identify your category below and choose the relevant alternative on this form. For more information, please see the programme under "Registration Information"

REGISTRATION FEES

		Price SEK	No. of persons	Total SEK	(code)
Registration fees excl VAT	Fee received before April 15	4 000	1	_____	(001)
	Fee received thereafter	5 000	1	_____	(003)
Registration fees incl VAT	Fee received before April 15	*5 000	1	_____	(002)
	Fee received thereafter	*6 250	1	_____	(004)

Social Programme

Welcome Reception, Sunday, June 6	incl.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(106/107)
Stockholm City Hall Reception, Monday, June 7	incl.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(109/110)
Congress Dinner, Tuesday, June 8 (included for participant)	incl.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(112/111)
Additional Ticket for Congress Dinner, Tuesday, June 8	*700	_____	_____	(114)

Hotel deposit per room

3 000 _____

*Any VAT increment will be specified in the confirmation letter. StoCon's VAT registration number is SE556127722801.

Total SEK _____

ACCOMMODATION

	Hotels	Single room	Double room
Arrival: ____/____	Scandic Hotel Continental	<input type="checkbox"/> 2 250	<input type="checkbox"/> 2 680
	Rica City Hotel Stockholm	<input type="checkbox"/> 1 436	<input type="checkbox"/> 1 661
Departure: ____/____	Rica City Hotel Kungsgatan	<input type="checkbox"/> 1 436	<input type="checkbox"/> 1 661
	Wallin Hotel	<input type="checkbox"/> 1 325	<input type="checkbox"/> 1 575

Special requests (non-smoking/sharing double with (name) etc): _____

Price quoted by the hotels are given in Swedish Kronor (SEK) for 2003 and are likely to be increased for the year 2004. The exact room rate will be stated in the upcoming confirmation letter. The price is per room and night including breakfast and VAT 12%. Your reservation will be confirmed when Stockholm Convention Bureau has received your hotel deposit.

For low price accommodation alternatives, see Hotel Information or www.stocon.se/icga2004

PAYMENT

Payment should be made in SEK, payable to Stockholm Convention Bureau. Please make sure you indicate **ICGA2004** and your name and company on all money transfers.

Bank Account, SEB Banken, Stockholm No 5267-10 066 16, SWIFT-address ESSESESS (IBAN Account No SE7350000000052671006616)

Eurocard/Mastercard Diners Club American Express Visa

Charge my card No: _____

Expiry date: _____ Total SEK: _____

Postgiro 65 37 38-5 (from Nordic countries) Bankgiro 644-8773 (within Sweden only)

I have studied the congress invitation programme and approve the planned processing of my personal data, as described in "Registration".

Date _____ Signature _____

Please return to: Stockholm Convention Bureau, P.O. Box 6911, SE-102 39 Stockholm, Sweden. Fax: +46 8 54 65 1599