REGISTRATION FORM

Please rename this file to Familyname\_regBDS2018.pdf and send it by email at bds2018@ulb.ac.be before July 31th, 2018

PARTICIPANT *(please use capital letters)*

FAMILY NAME

FIRST NAME

POSITION

AFFILIATION

ADDRESS

ZIP CODE

CITY

COUNTRY

E-MAIL

REGISTRATION FEES (*please check one category)*

* payment until May 15th, 2018: € 470.00
* payment after May 15th, 2018: € 550.00

Full Delegate

(includes access to the conference sessions, *conference proceedings, lunches, coffee breaks, conference dinner and social events*)

* payment until May 15th, 2018: € 270.00
* payment after May 15th, 2018: € 350.00

Student (PhD defense in 2019 or later)

(includes access to the conference sessions, *conference proceedings, lunches, coffee breaks, conference dinner and social events*)

* payment until May 15th, 2018: € 110.00
* payment after May 15th, 2018: € 150.00

Accompanying person

(includes *conference dinner and social events*)

**PAYMENT**

* I enclose a copy of the bank transfer to the following account:

Bank Account Number (IBAN):   BE04 3751 0081 7031

BIC/SWIFT: BBRU BE BB

Bank Name: ING Belgium

Bank Account Holder Name (Beneficiary Name): UNIVERSITE LIBRE DE BRUXELLES

Beneficiary Address: Avenue F.D. Roosevelt 50, 1050, Brussels

Beneficiary VAT Identification Number:  BE0407626464

Communication "Family name, BDS2018/4R00F000440"

* (**ONLY for students**) I enclose a declaration of eligibility signed by my supervisor to benefit of the reduced fee

 signature date