NEUROSCIENCE

REGISTRATION FORM page 1 of 2



FULL NAME

First Name: Title: Last Name:

ADDRESS

Street Address:
City:
Zip Code:
E-Mail Address:

State / Province / Canton: Country: Phone Number:

REGISTRATION FEE INCLUDES

(see the program - www.laban.ch)

laban event 2019 badge, lecture demonstration, workshops, conferences, coffee breaks, lunch (fri., sat. and sun.) and dinner (fri. and sat.), (please add CHF 30.- to include thursday dinner) students professional

CHF 320.- (SWISS FRANCS)

CHF 360.- (SWISS FRANCS)

PAYMENT

In Switzerland, make payment to:

Laban Event - Nunziatella Beltrametti, 6850 Mendrisio CCP: 65-238790-8

IBAN: CH16 0900 0000 6523 8790 8

or

International payment to:

any bank charges related to the payment shall be paid by the applicant

Laban Event - Nunziatella Beltrametti, CH-6850 Mendrisio IBAN: CH16 0900 0000 6523 8790 8 BIC / SWIFT: POFICHBEXXX PostFinance Ltd

Mingerstrasse 20 3030 Bern Switzerland

IMPORTANT: your application will not be considered valid until your full payment has been received at which point you will receive an e-mail of confirmation (please allow five working days after payment), no refunds are made.



LABAN EVENT 2019

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REGISTRATION FORM page 2 of 2

REFER	FERRAL INFORMATION Directly from us via email			Please share with us how you found out about Laban Event 2019 Friend or Colleague			
	Web search			Other (please specify)			
LANGU	AGES						
	English	Italian		French	German		
	other:						
FOOD PREFERENCES							
	Anything is good	١	/egetarian		Vegan		
	other:						
		250					

FOOD INIOLERANCES Please specify what your allergies and intolerances are: