

# **Registration & Payment Form**

PLEASE, USE ALL CAPS ONLY. **DO NOT SEND BY FAX.** FILL IN ALL BLUE SHADED AREAS, AS APPROPRIATE Faculdade de Ciências e Tecnologia Universidade Nova de Lisboa Monte de Caparica, Portugal

## 11 - 12 September, 2006

### www.atelp.org/conferencia.htm

DO NOT send this form just to "reserve" your seat at the conference. SEND form after payment has been made.

> Participant's spouse / accompanying person? Use the SPOUSES's form (see Web page)

First Name:		
Last Name:		
Company / Institution / School:		
Address:		
City:	Postal Code:	
Country:	Phone:	
Fax:	e-mail:	

Badges will show: First and Last Name and Company/Institution/School of the participant

Conference Fees	Registration AND Payment received UNTIL JULY 17	Registration AND Payment received AFTER JULY 17 (processed on site)
ATeLP Members and/or Speakers	€80,00	€120,00
Members of FIT-Affiliated Associations	€100,00	€140,00
All other participants	€120,00	€160,00
Students (ID card to be presented at the Reception Desk)	€40,00	

**INCLUDED IN THE CONFERENCE FEES**: Attendance to all **contrapor2006** conference sessions, conference documentation, coffee breaks and lunches (11 and 12 September) and participation in all social events.

**CANCELLATION POLICY:** The **ATELP** will confirm your Registration by e-mail after actual reception of the admission fees. All cancellations or refund requests must be made by e-mail to **contrapor2006-registration@atelp.org**. Cancellations received until September 1st will be refunded less a  $\in$  30,00 processing fee. No Refunds will be given for cancellations received after September 1st or for No-Shows. Substitutes will be accepted at any time provided that the Organising Committee is advised of the change.

#### Payment Instructions (Payment by Bank Transfer ONLY. Please, DO NOT mail cheques)

Send payment to:	ATeLP – Associação de Tradução em Língua Portuguesa	
Bank:	Caixa Geral de Depósitos	
NIB:	0035 0081 0010 1026 0303 7	
BIC (SWIFT):	CGDIPTPLXXX	
IBAN:	PT50 0035 0081 0010 1026 0303 7	
My payment has been made by Bank Transfer on:		

Member of FIT-Affiliated Association (*) My Association is:		
,	Other	
	Student	
Fee paid:	€	,00

(\*) Find out if your association is a member of FIT at http://www.fit-ift.org > Members

#### IMPORTANT: Send this form by e-mail (as .doc file) to DO NOT SEND THIS FORM BY FAX

FAX a copy of bank receipt to OR e-mail a scan / PDF of the receipt to

You may also mail the form / copy of your BANK RECEIPT to

contrapor2006-registration@atelp.org

+ 351 213 15 11 30 (please, write your name on the receipt) contrapor2006-registration@atelp.org

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