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# registration form

**Prague, Czech Republic, October 7-9, 2019**

Personal data

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mr.**  |  | **Ms.** |  | **Titles:** |
| **Family/Surname:** | **First name:** |
| **Company name:** |
| Department: |
| Company address: |
| City: | ZIP Code | Country: |
| Phone: | Fax: | E-mail: |
| **Mailing address** (if different)**:** |
|  |
| City: | ZIP Code: | Country: |
| Ac Accompanying persons: |
| Mr. |  | Ms. |  | Family name: | First name: |
| Mr. |  | Ms. |  | Family name: | First name: |

Registration fee (in EUR)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Before****August 31, 2019** | **after**A August 31, 2019 | **Payment at desk** (cash or Credit Card\*) | **EUR** |
| Participant | **500,-** **[ ]**  | **520,-** **[ ]**  | **530,-** **[ ]**  |  |
| Student | **300,-** **[ ]**  | **320,-** **[ ]**  | **330,-** **[ ]**  |  |
| Accompanying person | **180,-** **[ ]**  | **180,-** **[ ]**  | **200,-** **[ ]**  |  |
| **Registration fee (total)** |  |

Commercial presentation (in EUR)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **before****August 31, 2019** | **before****September 15, 2019** | Number | **EUR** |
| Poster  | **100,-**  | **120,-**  |  |  |
| Advertisement in Proceedings (price per page) | **130,-**  | **150,-**  |  |  |
| **Commercial fee (total)** |  |

**Accompanying Events** (preliminary order)

|  |  |  |  |
| --- | --- | --- | --- |
| **HiLASE / ELI****Laser center****visit** | **Tour to Dolni Brezany near Prague****(5-hours) by own bus; finished with workshop ending common lunch,****and return to hotel MERITUM** | **35,- Eur/person**Payment possible together with the fee or later at the registration desk | Be interested to participate in the number ……. of people |
| **Prague****sight-seeing** | **The best of Prague (4hours) with our guide and bus** (A minimum number of participants is 10 persons) | **39,- Eur/person**The price is paid at the registration desk. | Be interested to participate in the number ……. of people |

Sightseeing : Prague Castle, Old Town, Lesser Town Square and Charles Bridge

**Accommodation order** (prices in EUR per night - please mark requested services)

|  |  |  |
| --- | --- | --- |
| I am ordering accommodation in the hotel MERITUM \*\*\***(Congress centre)** | Arrival date: | Number of nights: ............ |
| Departure date: |
| beforeAugust 31st, 2019 | afterAugust 31st, 2019 | at place(cash or credit card) |
| single room | 58 [ ]  | 63 [ ]  | 68 [ ]  |
| double room (price for 2 persons) | 75 [ ]  | 80 [ ]  | 85 [ ]  |
| **Accommodation payment total:** |  |

Meritum\*\*\* Hotel is conveniently located in a quiet and hospitable part of the city near the International Vaclav Havel Airport in Prague 6, Ruzyně. This hotel offers 50 comfortably furnished rooms. The rooms are equipped with a minibar, safe deposit and Wi-Fi connection. Rooms included in the business category are equipped with TV. All include toilet and bathroom.

The accommodation can be reserved on your wish in other hotels on your special demand. If you need more information about accommodation and other services - concert and theatre tickets, sightseeing tours with English or German guide, or some special trips to interesting places in the Prague environ - please contact directly: **Travel Agency DANTOUR, Machuldova 571, 142 00 Praha 4, Czech Republic.**

Mail: daniela@dantourservice.cz, GSM: +420 603 429 523.

 NDT in Progress

October 7 – 9, 2019, Prague, Czech Republic

Please fill in your name and further information as you would like to appear on your badge:

Name ……………………………………… First Name ……………………………………………..

Title ……………………………………… Country …..……………………………………..

Payment summary :

|  |  |
| --- | --- |
| Registration fee |  EUR |
| Commercial presentation  |  EUR |
| Accommodation |  EUR |
| Total payment (all charges to sender´s account) |  EUR |

Payment by:

1) Bank transfer to:

Account:Owner: **Czech Society for NDT**, Technicka 2, CZ 616 69 Brno, Czech Rep.

Bank: **Komercni banka a.s.,** Praha, Czech Rep.

SWIFT Code: **KOMBCZPPXXX**

IBAN (Intternational Bank Account Number): **CZ9401000000510123780297**

For simplified identification of your payment create and use a reference symbol (4 digits), please: \_ \_ \_ \_

2) I will pay cash at the registration desk: [ ]

3) I will pay by Credit card at registration desk:

MasterCard [ ]  VISA [ ]  American Express [ ]  Diners Club [ ]  JCB [ ]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Date |  | Signature |  |

Cancellation charges (from the payment):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Before September 1st | September 1st September 14th  | September 15thSeptember 30th | After September 30th |
| Conference fee and commercial presentation | Bank charges only | 20% | 20% | 50% |
| Accommodation | 30% | 50% | 100% |

**Please send this form by e-mail or post (or use fax) to:**

Dr. Zdenek Prevorovsky

Institute of Thermomechanics CAS (NDT in P) http://ndt2017.it.cas.cz

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