



GOULANDRIS NATURAL HISTORY MUSEUM

MEDMS III • 2015

ATHENS, GREECE; June 28 - July 2, 2015

REGISTRATION FORM

Please complete this form and return it by e-mail or fax to:
THE GOULANDRIS NATURAL HISTORY MUSEUM
13 Levidou street - 14562 Kifisia, Athens (Greece)
Tel. +30-210-8015870 (internal: 519) fax +30-210-8080674
E-mail: medmsiii@med.uoa.gr

Prof./Dr./ (Surname): _____ (Name): _____
University/Company: _____
Zip _____ City _____
State: _____ Tel: _____ Fax: _____ E-mail: _____

Registration fees (includes lunches, refreshments, program portfolio, book of abstracts)

	BEFORE MAY 30, 2015	AFTER MAY 30, 2015	On site (June 28-July 2, 2015)
<input type="checkbox"/> <i>Regular</i>	180 €	200 €	240 €
<input type="checkbox"/> <i>Student*</i>	90 €	100 €	120 €
<input type="checkbox"/> <i>Accompanying Person</i>	50 €	50 €	50 €
<input type="checkbox"/> <i>ISLAND TOUR</i>	100 €	100 €	100 €

* Certification of student status together with the registration form is required.

Payment can be made by:

- Cheque issued to: **The Goulandris Natural History Museum**
- Bank transfer to:

Bank name: ALPHA BANK
Bank address: KORAI 1 str. Athens, P.C. 10564, GREECE
IBAN: GR95 0140 8030 8030 0200 2004 349
BIC/SWIFT: CRBAGRAAXXX

The receipt should be addressed to: _____

Special requests: _____

Date _____ Signature _____