**COMPANY**

**DELEGATE** (name badge will be printed accordingly)

Family name

First name

Job title, degree/designation

Date of Birth

Phone Mobile

E-mail Fax

**If you are traveling with your spouse**

Spouse’sfamily and first name

Spouse’s e-mail or contact phone number

**HOTEL Crowne Plaza Helsinki** (Mannerheimintie 50, 00260 Helsinki),

 tel. +358 9 2521 0000, web: [www.crowneplaza-helsinki.fi/en](http://www.crowneplaza-helsinki.fi/en)

[ ]  Reservation via IA Intercable (prepayment) [ ]  Reservation on my own

Arrival Date Departure Date

**ROOM TYPE**

Single occupancy Double occupancy

[ ]  Standard Room (€138) [ ]  Standard Room (€153)

[ ]  Club Room (€173) [ ]  Club Room (€188)

[ ]  Junior Suite (€188) [ ]  Junior Suite (€203)

**PAYMENT METHOD**

[ ]  By credit card (Authorization Form) [ ]  By bank transfer (Hotel invoice)

Name of your hotel in case you book on your own

Your flight No from date

Your return flight No to date

**REGISTRATION FEE €200 (for every second and further participant)** will be paid:

[ ]  By wire transfer [ ]  By cash upon arrival

**Participation in an excursion** to Maillefer Extrusion Oy (16.06.16) [ ]  yes [ ]  no

How would you like to receive compiled reports from the Scientific & Technical Symposium:

[ ]  printed book and CD-ROM [ ]  CD-ROM only

Date Signature