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Conference Registration Form for Delegates and Companions

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| DELEGATE INFORMATION |
| Name (required) |  | Title(Mr, Mrs, Dr, etc) |  |
| Organization |  |
| Address |  |
| City |  | Zip/Post Code |  |
| State |  | Country |  |
| E-mail |  | Phone |  |
| ACCOMPANYING ADULTS AND/OR CHILDREN |
| Name(s) | Relationship |
|  |  |
|  |  |
|  |  |
| **CONFERENCE FEES** |
|  | Fees |  **Your Payment** |
| Member  | SEK 5 200 |  | SEK |
| Corresponding member | SEK 2 500 |  | SEK |
| Student member | SEK 1 500 |  | SEK |
| Sponsor (person from IRG Regular and IRG47 local sponsor) | SEK 5 200 |  | SEK |
| Non Member  | SEK 7 400 |  | SEK |
| Student non-member | SEK 2 500 |  | SEK |
| Companion (family member -15 years old or older - not attending conference sessions) | SEK 1 700 |  | SEK |
| Late registration (add if you register after April 30 2016) | SEK 500 |  | SEK |
| Companions Tour Monday 16 May  | SEK 1 000 |  | SEK |
| Companions Tour Tuesday 17 May  | SEK 1 000 |  | SEK |
| Companions Tour Thursday 19 May | SEK 700 |  | SEK |
| **Total fee to be paid to the IRG Secretariat** |  | **SEK** |
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| **Method of Payment** |
|  🞏 Bank Transfer to Svenska Handelsbanken (see Money Transfer Details) |
|  🞏 Cheque in SEK made payable to the IRG Secretariat |
|  🞏 Visa or 🞏 Mastercard (tick one) |
| Card No |  |
| Name of Card Holder(as written on the card) |  |
| Expiration Date (month/year) |  | Total amount |  | SEK |
| Signature ofCard Holder |  |
|  |  |
| **Money Transfer Details** |
| ***Bank account Svenska Handelsbanken*** |  |
| IBAN No: SE 79 6000 0000 0003 9515 4421 |  |
| BIC: HANDSESS |  |
| Address:Svenska HandelsbankenBox 26078SE-100 41 StockholmSWEDEN |  |
| **Please complete in CAPITALS and return before 15 April to:**IRG Secretariat Box 5609SE-114 86 StockholmSWEDENE-mail: irg@sp.se For any further information please contact Mr Jöran Jermer, IRG Secretary-General (Tel: +46 70 510 29 17, E-mail: joran.jermer@sp.se).  |