



# 3<sup>rd</sup> Tourism Conference

CONFERENCE CENTER  
"I. VELLIDIS"  
THESSALONIKI

ELLOPIA HALL

## REGISTRATION FORM

€30 (incl. VAT 24%)

### PERSONAL INFORMATION

FIRST NAME	LAST NAME	
JOB TITLE		
COMPANY		
ADDRESS	CITY	POST CODE
TELEPHONE	FAX	E-MAIL

### INVOICE INFORMATION

COMPANY	
DESCRIPTION	
ADDRESS	
VAT NR	TAX OFFICE
CONTACT PERSON	
E-MAIL	TEL.

### PAYMENT METHODS

- Deposit of the amount:  
ALPHA BANK, BANK ACCOUNT: 206 00 232 0000 243, IBAN: GR58 0140 2060 2060 0232 0000 243  
(Payee: American-Hellenic Chamber of Commerce)  
*Please complete this form and send by fax or e-mail up to May 7, 2018*  
*e-mail: e.kiriakidou@amcham.gr, tel. 2310-286453, Fax 2310-225162, Evgenia Kiriakidou*
- Credit Card
- |                    |             |
|--------------------|-------------|
| Credit card number | CW          |
| Owner Name         | Expiry Date |

Date

Signature

Cancellation Policy:  
Cancellations are accepted by fax or e-mail up to May 7, 2018 to get a full refund.  
From May 8 onwards no refunds shall be issued.

Participation is valid with prepayment

The information provided can be used by third parties

CO-ORGANIZERS

