



## REGISTRATION FORM

Complete and send this registration form to HAU Office, fax: 210-3633174, or email it at [project@hau.gr](mailto:project@hau.gr)

I wish to enroll for the following seminar:

**PSM Prep Course, 7-8 July 2015**

**Registration deadline: June 26, 2015**

### REGISTRATION FEES ✓

Regular Fee	<input type="checkbox"/>	€650
Members of affiliated professional bodies (PMI/IPMA/IIBA/ISACA/ISC <sup>2</sup> )	<input type="checkbox"/>	€600

VAT exempt. Fees include all conference material, hands-on tools, coffee and lunch breaks. **OAED subsidy** YES  NO

### DELEGATE'S PERSONAL DETAILS (please print clearly)

Family Name		First Name	
Position (Title)			
Company			
Bus. Tel.		Fax:	
e-mail			

### INVOICE DETAILS (for companies only)

Name of Company			
Type of Business			
Address			
Postal Code		City	
Tax ID Nr.		Tax Office	
Person in charge for Payments		Tel/e-mail:	

Payments are made to the Hellenic American Union upon registration by bank deposit. For bank deposit/transfer information please contact the Hellenic American Union. Please always quote the invoice number which you will receive once you have registered, or alternatively please quote your company's name or the delegate's name in the transfer instructions.

Please invoice my company       Bank Deposit/Transfer

### PAYMENT DETAILS

Payment is due to the Hellenic American Union with registration. If you cannot attend, you must cancel your registration in writing before June 26, to receive a full refund. Cancellations received after June 26 are liable for the full fee. Of course a replacement is always welcomed.

The undersigned fully accepts the terms and conditions of this registration form.

Name \_\_\_\_\_ Signature & Company seal \_\_\_\_\_ Date \_\_\_\_\_

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