**46th EPRA Meeting**

**Vienna, 11 – 13 October 2017**

**Participation Fee Form**

**Please use block letters**

[ ]  Mr. [ ] Mrs.  [ ]  Ms.

First name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post Code: \_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

V.A.T. ID number

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \* | **Participation fee (due for the 3rd and every further member of your delegation each)**  | **200.00 EUR** |
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**Payment Instructions:**

|  |  |
| --- | --- |
| **Bank** | **UniCredit Bank Austria AG** |
| **In favour of** | **RTR-GmbH** |
| **IBAN** | **AT45 1200 0006 9617 0109** |
| **SWIFT CODE** | **BKAUATWW** |
| **Reference** | *EPRA Meeting + Participant Name*  |

You will receive a receipt by e-mail after payment.

**Please fill out this form and email it before 5th September 2017 to:**

Ms. Gabriele Kontriner Tel: 0043 1 58058 – 204, gabriele.kontriner@rtr.at

**AND**

Mr. Jörg Stefan Baumgärtel Tel: 0043 1 580584 - 171, joerg.baumgaertel@rtr.at