

ANNUAL CONGRESS OCTOBER 23rd - 27th, 2015 MIAMI - UNITED STATES OF AMERICA

REGISTRATION FORM

Dear Member,

This year, our annual convention will hold in Miami, Florida, United States of America. To benefit good rates for the flights, we suggest to book your ticket as soon as possible.

And to organise this event in the better way, please take time to fill in completely and correctly the form.

Please note that the rates are fixed in US Dollars (USD).

PARTICIPANTS

Company name: _____

DELEGATE N°1

Name : _____ Surname : _____
Date of birth : _____ Passport N° : _____
Email : _____ number : _____
Private address: _____

DELEGATE N°2

Name : _____ Surname : _____
Date of birth : _____ Passport N° : _____
Mobile phone : _____
Email : _____ number : _____
Private address: _____

GUEST

Name : _____ Surname : _____
Date of Birth: _____ Passport N° : _____

CHILD N°1

Name: _____ Surname: _____
Date of Birth: _____ Passport N° : _____

CHILD N°2

Name: _____ Surname: _____
Date of birth: _____ Passport N° : _____

STAY

BOARD OF PARTICIPATION FEES*

nbr participants \ Stay	CONVENTION OCTOBRE 23 th -27 th A	CONVENTION+EXTENSION OCTOBRE 23 th -30 th B
	1 adult/room	2'150.00
2 adults/room	3'300.00	4'950.00

For any other special request, please contact us

* all prices are in USD. Are included: accomodation, all meals and entertainment presented in the program during the chosen package.

INSCRIPTION

Thank you to note the chosen package

	PACKAGE	AMOUNT
1 adult		-
2 adults		-
Amount of the stay:		-
50% advance to pay at the registration (Only in USD)		-
Due to pay before September 30 th 2015		-

ROOMS CHOICE

	Single room 1 bed	Double room 1 king bed	Double room twin beds
Quantity of rooms			

ADDITIONAL DATA

LANGUAGES

Monther tongue :

Language for the visit :

French

English

Spanish

FLIGHT PLAN

Please indicate all your flights (stops if applicable)

	ARRIVAL	RETURN	
DEPARTURE AIRPORT		DEPARTURE AIRPORT	
ARRIVAL DATE		DEPARTURE DATE	
ARRIVAL TIME		DEPARTURE TIME	
AIRLINE COMPANY		AIRLINE COMPANY	
FLIGHT NUMBER		FLIGHT NUMBER	
		FINAL DESTINATION	

VISA

For all participants who have the opportunity to make an ESTA registration, please complete it as soon as possible. Without this registration, it is impossible to travel to the United States.

For the other participants, the US visa is obligatory. Thank you to contact the US embassy of your country to know the terms. We will provide the hotel confirmation and the invitation letter.

Please note that all visa request shall be received before July 31st 2015.

SPECIFIC DIET

Do you have a specific alimentary diet?

YES

NO

If yes, which one ?

vegetarian

no pork

gluten free

allergic (which one?)

other (which one)

BANK DATA

Creditor: Association EuraAudit International, Chez Cocerto et Associés
Address: 1 Rue Edouard Nignon CS 77214 44372 Nantes Cedex 3
Bank: CIC NANTES LOIRE ENTREPRISES
Bank address: 4 Rue Marie Curie - CS42410 - 44124 Vertou Cedex - France
Account number: 20091202
IBAN : FR76 3004 7141 2100 0200 9120 206
BIC: CMCIFRPP

Place & date

Signature

Thank you for filling in correctly and completely the form with all the necessary information, and then date and sign it and send it before July 31st 2015 at the following email : secretariat@euraudit.org, or by fax: +41 21 311 55 85

