##### CENTRAL EUROPEAN MEETING OF SEDIMENTARY GEOLOGY

June 9-13, 2014, Olomouc

***REGISTRATION FORM***

Please complete and return this on-line form, along with your payment **no later than**  **March 31. 2014** to

Conference Centre of Palacký University, Mrs. Jitka Hýbnerová, Biskupské nám. 1, 771 11 Olomouc, Czech Republic,

Tel.: \*420-585 631 125, Fax: \*420-585 222 802

(one for each individual, please make copies if necessary)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Title:** | **Last name:** | | | | **First name:** | | |
| **Address for correspondence** | | | | | | | |
| Institution: | | | | | | | |
| Street: | | | Postal/Zip Code: | | | City: | |
| Country: | | Tel.: | | Fax: | | | E-mail address: |

**ACCOMPANYING PERSON(S)**

|  |  |
| --- | --- |
| Last name: | First name: |

|  |
| --- |
| I confirm the title of my paper: oral ***□***  ٱ poster ***□*** ٱ |

|  |  |
| --- | --- |
| **REGISTRATION FEES/** 21% value-added tax included: | **EUR / CZK** |
| Participant | 130 / 3500 ***□*** |
| Student | 60 / 1600 ***□*** |
| Late registration and payment (after March 31, 2014) | + 50 / 1350 ***□*** |
| Accompanying person | 40 / 1000 ***□*** |

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| --- | --- | --- | --- | --- | --- |
| **SOCIAL PROGRAME and FIELD TRIPS** | | **Price (EUR/CZK)** | **YES** | **NO** | **Number of persons** |
| June 10, 2014 | Icebreaker Party | free |  |  |  |
| June 11, 2014 | Conference Dinner / | 20 / 500 |  |  |  |
| June 9-10, 2014 | Pre-conference: Bohemian Cretaceous Basin | 100 / 2700 |  |  |  |
| June 9-10, 2014 | Pre-conference: Moravo-Silesian Culm Basin | 100 / 2700 |  |  |  |
| June 13, 2014 | Post conference: Southern Moravia | 35 / 950 |  |  |  |
|  | I prefer vegetarian meal | -- |  |  |  |

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| --- | --- | --- | --- | --- |
| **I REQUEST BOOKING OF ACCOMMODATION**  **IN THE STUDENT HOUSING FACILITIES** | | **Room price per night** | **Choice:** | **Alternative :** |
| Student dormitory – single room / without breakfast | | 25 € |  |  |
| Student dormitory double room / without breakfast | | 26 € ( i.e. 2x13€) |  |  |
| I want to share the room with: | | | | |
| Date of arrival: | Date of departure: | | | |

|  |  |
| --- | --- |
| I request to send the invoice ( for reg. fee payment) □ | I request VAT receipt/bill ( in case you already paid reg. fee) □ |
| VAT No: | |
| Address: | |

Date:……………………………………… Signature: ………………………………………