**Registration Form**

**Personal Info**

Name:

Address:

NIF (Portugal citizen only):

City: Zip code: Country:

E-mail:

Phone:

**Please, included here the title of your presentation**

**Invoice Info (if different from above)**

Bill to:

Address:

City: Zip code: Country:

VAT Number (if registered in EU only):

**Please, describe briefly your scientific interests and topic areas on which your and your group’s research is focused (300 words).**

**This information will be collected and distributed to the participants before the meeting.**

**Send this registration form and the payment confirmation by e-mail to Silvana Munzi (capermed@gmail.com)**

Registration fee: 100 euros

**Payment Conditions**

National Bank Transfer

Nome do Banco: BES – Banco Espírito Santo, S.A.

IBAN: PT50 0007 0084 0001 9190 0001 2

Descrição: Nome – Capermed 2014

International Bank Transfer (All payments should be in Euros)

Bank details:

Account holder: Fundação da Faculdade de Ciências da Universidade de Lisboa

Account number: 0840 1919 0000

IBAN: PT50 0007 0084 0001 9190 0001 2

SWIFT CODE: BESCPTPL

Bank name: BES – Banco Espírito Santo, S.A.

Branch address: BES-FCUL, Edifício C7, Campo Grande, 1749-016 Lisboa

Reference: Name – Capermed 2014

**Conference and your name should be clearly mentioned in the form of the bank transfer. Payments with missing information may not be considered.**

The total amount of the fee should be credited to the conference organizer in one payment. Transfer expenses should be paid by you.

**Credit Card**

**IMPORTANT: Payment by credit card has a different cost:**

**Registration fee: 105 euros**

For credit card payment you should provide the following data:

I authorize the amount of Euros to be charged on my credit card.

 [ ] Visa [ ] MasterCard (We can only accept Visa or MasterCard)

Card Holders' name:

Credit Card Number:

CVV (3 rightmost digits on the back of the card):

Exp. Date:

Country from which the card was issued

Signature:

**By Check**

Must be send:

Att: Humberto Coito

In order to: “Fundação da Faculdade de Ciências da Universidade de Lisboa”

Address: Edifício C1, Piso 3, Campo Grande

1749-016 Lisboa

**Payments on site**

**For any payments received in cash on site, the invoices/receipts may not be delivered in that day. As such, in these cases, the participants should only receive their invoices (by post or e-mail) until the next 10th working day counting from the last day of the conference.**