

## Registration Form The Marketing and Sales Academy

**Please fax completed form to: ++41 4 4783 8778**

Title:	First Name:	Last Name:
Job Position:		
Company:		
Address:		
Town:	State:	Post Code:
Country:		
Tel:	Fax:	
Email:		

(or simply copy or attach your business card to the form)

### Registration

Please register me for the following workshops

Subject	Venue	Dates	Value (Euro)

Workshop attendance is Euro 1500 per day, per delegate,

This includes attendance at all speaker sessions, session papers, refreshments, special consultation with our marketing experts after the workshop.

*Special rates on request for multiple attendances from one company.*

### Accommodation

Please recommend accommodation for me at a convenient hotel

Arriving date: \_\_\_\_\_

Departing Date: \_\_\_\_\_

*(please note that all hotel costs are payable by delegates on their own account)*

### Payment

Please charge my credit card:

Visa

MasterCard

EuroCard

American Express

Card n° \_\_\_\_\_

Cardholder's name: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

I agree that my card will be charged in Euro at a rate applying at the time of transfer.

Signature \_\_\_\_\_

*Cancellations: You are welcome to substitute at any time. No refund will be made for cancellations within 4 weeks of workshop Programme: The organisers reserve the right to make changes to the programme.*

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