



1st IC4N-2008

Halkidiki Greece
June 16-18, 2008

1st International Conference
from Nanoparticles & Nanomaterials to Nanodevices & Nanosystems

REGISTRATION FORM

You are kindly requested to send the registration form by:

fax: +30 210 6642116 or

Email: pinelopi.tselondre@zita-congress.gr



to the congress secretariat.

Zita Congress & Travel

1st Km. Peanias Markopoulou Av.

19002 Peania, Attica, Greece

Contact person: Mrs. Pinelopi Tselondre

Tel: +30 211 1001781

One copy of the registration form should be completed for each participant (you may use the typewriter tool function). Please note that provided data will appear on your name badge.

DELEGATES DETAILS

Mr. Mrs. Ms. Prof. Dr.

Family name _____ First name (s): _____

Institution / Company: _____

Position: _____

Preferred postal address

Street / P.O. Box: _____ Zip Code: _____

City: _____ Country: _____

Telephone (country code): _____ City code: _____ Number: _____

Fax (country code): _____ City code: _____ Number: _____

Email: _____

ACCOMPANYING PERSON (s) details

Title(Mr, Mrs, other) _____

Family name : _____ First name: _____ Age*: _____

Title(Mr, Mrs, other) _____

Family name : _____ First name: _____ Age*: _____

* Only for accompanying persons below 18 yrs old



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HOTEL BOOKING DETAILS

A limited room block has been reserved at Hotel Meliton at Porto Carras Grand Resort with special rates in order to cover the needs of the congress. Reservations will be confirmed to delegates on a **First Come First Served** basis.

Type of room	Cost per day
Single Room	(no longer available)

No Rooms available on Sunday, June 15, 2008

Double Room	<input type="checkbox"/> € 137
Double Room for single use	<input type="checkbox"/> € 130
Junior Suite (2 people)	<input type="checkbox"/> € 188
Executive Suite (2 people)	<input type="checkbox"/> € 267

Children Policy

1 st Child in double or suite under 12yrs old	Free
2 nd child in double or suite under 12 yrs old	<input type="checkbox"/> € 34.25
3 rd person in double or suite over 12 yrs old	<input type="checkbox"/> € 48

Important notices

1. The above mentioned rates are all inclusive (include breakfast, service charges and VAT according to Greek regulations).
2. There are sea-view and garden-view rooms available and will be given on a **First Come First Served Basis**.
3. For pre and post overnights (subject to availability) same rates will apply.
4. Only a limited number of single rooms are available. The rest will be charged as double rooms for single use. For this reason, participants are encouraged to share rooms, if possible.
5. Check In Time is 15.00 pm and Check Out Time is 12.00 pm.

HOTEL BOOKING DETAILS

Arrival: _____ June 2008 Departure: _____ June 2008 Number of nights: _____

- One Single room One Double room Extra Bed
 Non-smoking room Late arrival Late departure (till 18.00)
 Additional rooms (please specify Nr of rooms and arrival and departure details): _____



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AIRPORT – HOTEL – AIRPORT TRANSFER DETAILS (Optional)

If you plan to use the bus transfer service to/from the hotel, please indicate your flight information. Put an approximate time if you don't have your flight information.

Arrival: _____ June 2008 Flight Number: _____ Arrival Time: _____ No of people: _____

Departure: _____ June 2008 Flight Number: _____ Departure Time: _____ No of people: _____

Cost per person for transfer by coach airport / hotel / airport 30 €

- ✚ Transfers by coach will be scheduled on the afternoon of Sunday June 15, 2008 from the airport to the hotel and from the hotel to the airport depending on flight information.

Cost per taxi for transfer airport / hotel / airport 210 €

AIR TICKETS

Zita Congress & Travel can offer its services concerning booking air tickets. In case that you are interested in booking your air tickets please fill the below information:

Departure City / Airport to Thessaloniki: _____ Date of departure: _____

Preferred Departure Time: _____ No of people: _____

Date of Departure to your country: _____ Preferred Departure Time: _____

REGISTRATION PROCEDURE

- All the above mentioned prices include the Greek VAT and are quoted in Euro (€). Should the statutory VAT change, the rates will be adjusted accordingly.
- Your registration will be processed within 3 working days. Immediately after, a confirmation mail will be sent to you informing you of the confirmed registration and services.
- Should you not receive this mail in three working days, please contact the Zita Congress & Travel.
- We recommend that you authorize us to charge your credit card as a way of payment. But if you prefer to settle your account by bank deposit, you will be informed in the confirmation mail of the option date to send your payment. Proof of payment will be valid only by faxing us (on 0030 210 6642116) the bank receipt that states your Family and First name. In case we do not receive the bank receipt, the registration will be automatically cancelled and you will be informed of the cancellation via mail.
- For administrative and preparatory reasons, acceptance of registrations will be until 12th June, 12:00 hrs (GMT+2). From this date onwards, we advise you to register and pay on-site at the congress secretariat, during congress registration hours.

METHOD OF PAYMENT

At the time of confirmation we will charge as following:

- Full amount of participants and accompanying person's registration fees and social program.
- The 50% of the total amount regarding accommodation and pre / post congress tours

On June 8th, 2008 we will charge the balance of 50% of the accommodation.

CANCELLATION POLICY & SUBSTITUTION POLICY



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All changes and cancellations can only be made in writing.

In case of cancellation, the following policy applies

1. Registration fees are not refundable.

For hotel accommodation:

1. In case of total cancellation, which has to be sent in writing, that will occur till 31st March 2008, the cancellation fees will be 60% of the value of the total number of overnights.
2. In case of total cancellation, which has to be sent in writing, that will occur till 15th May 2008, the cancellation fees will be 75% of the value of the total number of overnights
3. For partial cancellation on the number of overnights, after the registration form has been sent and up to 15th April 2008, the cancellation fees will be the cost of one (1) overnight.
4. For partial cancellation on the number of overnights, after the registration form has been sent and up to 8th June 2008, the cancellation fees will be the cost of two (2) overnights.
5. For any cancellation after 8th June 2008, as well as no show on the date of arrival cancellation fees will be applied for the total reservation value.

A handling fee of € 15.00 will be charged for any name change to an already received conference registration. A newly completed registration form for the substitute participant has to be sent to the Zita Congress & Travel Conference Secretariat. Name changes will be accepted by mail or fax until 8th June 2008. After this date, all name changes must be carried out on site.

TOTAL PAYMENT

1. I hereby authorize Zita Congress & Travel SA to charge my credit card with the total amount of EURO:
€ _____ which corresponds with registration fees, accommodation and/or social program cost, transfer costs and/or any subsequent charges that may occur (full payment, cancellation fees, substitution fees etc) regarding my participation in the 1st IC4N 2008.

- American Express Mastercard VISA

Card No

Expiry Date: ____ / ____

CVC (card validation code): (See the reverse side of the card in the signature field, and print the last 3 digits). For American Express cards the 4 last digits of the card number in the front side of the card)

Card holders name

Signature

2. I have deposited the sum of _____ € at the Congress Secretariat Bank Account and the I will also deposit the balance by 8TH June 2008

ASPIS BANK
Account Number: 047010101011510000134
IBAN: GR 66 047010101011510000134
Swift: ASPBGRAA
Beneficiary: Zita Congress & Travel

Please note that all costs for bank deposits should be paid by the participant

Important notices

1. A copy of the bank receipt for deposit must be sent by fax or mailed together with the completed registration form.
2. A copy of the bank receipt for full settlement must be sent by fax or mailed.
3. All receipts must state the 1st IC4N 2008 + Family name + First name.
4. When names of participants are NOT stated on the bank transfer, your payment cannot be linked. Consequently, your payment will be unknown to the Administration Office. Consequently the reservation will not be honoured.
5. Company and personal cheques are not accepted.
6. Please do not forward any values by mail. The Congress Secretariat will accept no liability for any loss.

Please indicate if you wish a letter of invitation for visa purposes

Date of birth: _____ Passport Number: _____