**REGISTRATION FORM**

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| **PERSONAL DATA** |  |
| Name: |       | Title: |  |  |
| Institution: |       |  |
| Address: |       |  |
| City/Country: |       |  |
| Teleph/Fax: |            | E-mail: |       |  |
| Accompanying person(s): |       |  |
| Invoice (name, address) |       |  |
| VAT number: |       |  |
| Your identification badge: Name:  |     Affiliation: Country:   |  |
| Presenting Author |  | Yes | **Abstract ID:** |  | Invitation letter for visa application |  | Yes |  |
| **REGISTRATION FEE – PAYMENT** |  |
|  | Before 4 January 2016 | After 4 January 2016 |  |
| SPM, Ordem Engenheiros or ESIS member  |  Member Nº |       |  | 350 EUR |  | 400 EUR |  |
| Full  |  | 400 EUR |  | 450 EUR |  |
| Student (\*) |  | 150 EUR |  | 200 EUR |  |
| Accompanying person (\*\*) |  | 100 EUR |  | 150 EUR |  |
| **TOTAL AMOUNT** | **\_\_\_\_\_** | **EUR** |  |
| The registration fee includes: Conference program (\*\*), Coffee breaks (\*\*), daily lunch (two days; \*\*), Congress dinner (excluding \*), Welcome Reception, Participation certificate (\*\*). |  |
| **PAYMENT METHOD** |  |
|  | Credit card | Please go to [**https://www.idmec.ist.utl.pt/payment**](https://www.idmec.ist.utl.pt/payment) |  |
|  | Bank TransferAccount holder: IDMEC – Instituto de Engenharia MecânicaBank: BPI, Instituto Superior Tecnico Branch (Av. Rovisco Pais, 1, 1049-001 Lisboa)NIB: 0010 0000 33867060101 59Bank Code Number: BBPIPTPLAccount Number: 2-3386706.001.001IBAN: PT50 0010 0000 3386 7060 1015 9**Currency exchange charges and bank collection fees are the responsibility of the sender**.Please indicate clearly your name and “**PCF2016**” on the bank documents. |  |  |

**Cancellation policy:** Registration fee will be refunded with a cancellation fee of 50 EUR if a request is received in writing one month before the conference (January 10). After this date NO refund will be made. There will be no refund to authors of abstracts/papers associated with scheduled presentations.

A letter confirming the receipt of this form and the payment will be sent by e-mail.

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

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| **Please send the completed form by e-mail to:** **pcf2016@dem.ist.utl.pt** |