

REGISTRATION FORM FOR EXHIBITION

9th International Congress and Exhibition on Aluminium Brazing 2016

19 – 21 April, 2016, Düsseldorf/Germany

Radisson Blu Scandinavia Hotel,
Düsseldorf/Germany

Please complete and return the Registration Form to:

DVS – German Welding Society,
P.O. Box 10 19 65, 40010 Düsseldorf/Germany

P +49. (0)2 11. 1591-155, **F** +49. (0)2 11. 1591-300, tagungen@dvs-hg.de

(Please fill the Registration Form out in capital letters.)

Exhibitor

Company
Street or P.O. Box
Postal Code, City
Country

Contact

Surname
First name
Title
Phone
Fax
E-mail

The VAT ID-number is requested from European Union attendees who register through their company/institute or register as a consultant!

VAT ID-number

Important for Registration



We hereby apply for the following space:

- ☐ ___ counter display(s) (equivalent to 1m²) with back panel** at **EUR 800*** plus VAT
☐ ___ counter display(s) (equivalent to 1m²) without back panel at **EUR 800*** plus VAT
☐ ___ area only at **EUR 550*** plus VAT (per m²)

Note:

Since the exhibition space is unfortunately very limited we recommend you to book early. The booking will be handled on a first come, first served basis.

- * including exhibitor personnel (one person per exhibiting company)
 (as from 3m², two persons per exhibiting company) and Social Evening Event
 ** poster size (back panel) 100 cm x 127 cm

Exhibitor personnel without Congress Participation:

Name 1: _____ Name 2: _____

For the Congress a reduced price will be offered for the exhibitor personnel only:

- ☐ **EUR 600** Name 1: _____
☐ **EUR 600** Name 2: _____
☐ **Social Evening Event (a registration is required)**

Any bank charges which may be incurred will be borne by the attendee.

N.B.: All bank transfers must bear the reference "Aluminium Brazing 2016" and the no. of invoice.

☐ By bank transfer:

DVS – German Welding Society
 Commerzbank AG, Düsseldorf
 IBAN code: **DE82 3008 0000 0212 6011 00**
 BIC code: **DRESDEFF300**

- ☐ **By credit card:**
☐ MasterCard
 ☐ Visa
 ☐ American Express*

Credit card no _____

Expiry date ____ / ____

CVC ____ last 3 digits on the back of the card

Card holder's name (Printed name)

*CVC ____ 4 digits on the front of the card

Date, Signature