Registration & Reservation Form
Please complete a separate form per participant
(Only accompanying persons can be included
on the same form).
Please type or print in small letters and **return this form no later than 2nd March 2009 to:**

ARTION Conferences & Events
Thomas Building, 2nd Floor. 9km Thessaloniki – Thermi
P.O. Box 60705, 57001 Thessaloniki, Greece
tel: +30 2310257807 (Conference Line), +30 2310272275
fax +30 2310277964, +30 2310272276
e-mail: agora@artion.com.gr

CONTINUITY, CONSOLIDATION AND CHANGE TOWARDS A EUROPEAN ERA OF VOCATIONAL EDUCATION AND TRAINING

THESSALONIKI, GREECE
16 and 17 March 2009
organised by
Cedefop

REGISTRATION DETAILS

Your personal data below will be published in the list of participants. If you wish the Secretariat to use a different address for communication, which will not be published, please fill in the Address 2 section.

Title:	☐ Prof.	☐ Dr.	☐ Mr.	☐ Ms.	
First name:					Address:
Family name:					City:
Position:					Post code:
Organisation:					Country:
Tel:					*Address 2* *(tel, fax, e-mail)* *(see note above)*
Fax:					
E-mail:					

ACCOMPANYING PERSONS

1. First name Family name (Ms☐/Mr☐/Child☐)

DIETARY REQUIREMENTS

Please indicate any special dietary requirements:

☐ Delegate ☐ Vegetarian Other, please specify: _____

☐ Accompanying person ☐ Vegetarian Other, please specify: _____

SPECIAL SERVICES

Please let us know if you require any special assistance.

INTERPRETATION

Will be provided during the plenary sessions of the conference from English, German, French, Czech and Greek into English, German and French. The workshops will be held in English.

I. WORKSHOP ATTENDANCE

Please select the workshop you wish to attend during the conference on Monday, 16 March 2009 (three parallel working sessions).

☐ 1. Implementing European tools and principles (EQF/NQFs, validation of non- and informal learning)

☐ 2. Promoting excellence and innovation in VET

☐ 3. Improving links between VET and the labour market

II. HOTEL ACCOMMODATION AND BUS TRANSFERS

Special room rates have been arranged for the participants of the conference. Prices are per room / night at the hotel and include buffet breakfast, services and all taxes. Please tick the appropriate rates applicable to the room type you require and fill in the total accommodation cost box.

Arrival (check-in) date in Thessaloniki: _____/03/2009
Departure (check-out) date from Thessaloniki: _____/03/2009

HOTEL	Location		Single	Double	No of nights	Total in EURO
MAKEDONIA PALACE 5* www.makedoniapalace.com	City centre	City view ☐	☐145	☐160	X_____	
MINERVA PREMIER 4* www.minervapremier.gr	City centre		☐90	☐100	**FULLY BOOKED**	
AD IMPERIAL 4* www.ad-imperial-hotel.gr	City centre		☐87	☐100	X_____	
EGNATIA 3* www.egnatia-hotel.gr	City centre		☐80	☐85	X_____	
I will make my own hotel arrangements at _____ *Please fill in the section; it will help us to contact you during your stay for the conference*						

Bus transfers to and from the above four hotels and Cedefop as well as the social events will be provided in line with the conference programme.

III. FLIGHTS

Please complete your flight details below. It will help our **airport welcome desk** staff to provide you with guidance and assistance upon your arrival on Sunday 15 March.

If your flight details are not available yet, you may inform us at a later stage.

Arrival from:	Flight no.:	Date:	Time:
Departure to:	Flight no.:	Date:	Time:

IV. SOCIAL PROGRAMME & FEES

Social programme includes	Date	I wish to participate
Welcome reception	Sunday, 15 March	☐ Delegate ☐ Accompanying person
Conference dinner	Monday, 16 March	☐ Delegate ☐ Accompanying person, 55€pp
City tour	Tuesday, 17 March	☐ Delegate ☐ Accompanying person, 30€pp

V. ACCOMPANYING PERSON'S TOTAL (FOR THE SOCIAL PROGRAMME)

Please tick as appropriate	**Fee**	**No of persons**	**Total**
Accompanying person	EURO	X_____	_____

GRAND TOTAL FOR (II) + (V)	**EURO**

VI. PAYMENT CONDITIONS

Hotel accommodation and accompanying person

Full payment for hotel accommodation and accompanying persons' fee, should reach the Conference Secretariat, no later than 02 March 2009.

VII. CANCELLATION POLICY

Hotel accommodation

1. Written cancellation received by 02 March — No cancellation fees
2. Written cancellation received after 02 March — One night hotel cancellation fee applies

Social programme for accompanying persons

1. Written cancellation received by 02 March — No cancellation fees
2. Written cancellation received after 02 March — No refund

All refunds will be processed after 27 March 2009

VIII. PAYMENT DETAILS
(PAYMENTS ARE MADE THROUGH THE INTERMEDIARY OF ARTION FOR CEDEFOP)

Please choose method of payment :

☐ **Bank transfer to the following bank account* :**

Beneficiary: ARTION
Account no: 5212-038-347-344
Swift number: PIRB GRAA
IBAN No: GR 24 0172 2120 0052 1203 8347 344
Bank: PIRAEUS BANK, ETHNIKIS ANTISTASEOS BRANCH (2212), THESSALONIKI
**You are kindly requested to send us a copy of your bank transfer by email or fax*

☐ **Credit card**

I duly authorise ARTION (in its role as intermediary) to debit my credit card for hotel accommodation and accompanying persons' registration fee as to guarantee reservation and settle my debit balance **by 02 March 2009.**

☐ Visa
☐ American Express
☐ Mastercard

Card no (16 digits):
Expiration date (MM/YY) :
Cardholders name:_____

IX. INVOICE

The invoice will be issued to:

☐ **The Participant** Passport Number _____

☐ **The Company** Company Name _____ VAT Number _____

Address _____

If not requested otherwise, you will receive your invoices for all payments by Artion Conferences & Events upon arrival.

By signing this form, I declare to accept all instructions & conditions for registration

Signature _____ Date: / /2009

PLEASE RETURN TO
ARTION Conferences & Events
FAX +30 2310 277 964,
E-MAIL: agora@artion.com.gr
If registered via E-mail and wish to pay by credit card, please return by fax page 3 with your signature and full name

Looking forward meeting you at the conference!

DATA PROTECTION

The information you provide on this form will be used by the Conference organising staff for the sole purpose of your participation in the Conference. Photographs of the event, including photographs which may identify individual participants, may be taken during this event and published by the organisers once the event is over. For this publication any personal data, including photographs of the event, will be processed in accordance with Regulation EC 45 of 2001. By providing your personal data and participating in this event, you consent to its use by the organiser of this conference for the above purpose.

Please find information related to Cedefop's Privacy Policy: http://www.cedefop.europa.eu/etv/help/legal.asp