



REGISTRATION FORM

Athens, 4th. – 9th. October 2008

REGISTERING COMPANY

NAME: JUR. FORM: ...
ADDRESS:
ZIP CODE: CITY: COUNTRY: ...
TELEPHONE: FAX:
EMAIL CONTACT: @
VAT/ ENTREPRISE NR:

GROUP LEADER

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

CREW MEMBERS

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

NAME and SURNAME: Mr/Mrs.
EMAIL ADDRESS: @
MOBILE TELEPHONE NUMBER:

Fill in this form and return it to
COMPANY IN BLUE
fax + 32 2 642 95 49
or
info@companyinblue.com

Please check whether every participant has a valid travel assistance insurance and consider underwriting a travel cancellation insurance.

Feel free to contact us for modification of any travel arrangement you may require. We will undertake all possible efforts to match your individual time schedule with the general YEE programme.

For your convenience fill in and return to us the preference form of your group. This form essentially covers food and drink preferences but we are ready to cater for any specific requirement or special wishes.

Declares to have read and accept the General Conditions of Company in Blue and the Specific Conditions of the YEE-event.

DATE PLACE TOTAL PRICE GROUP LEADER'S SIGNATURE

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