



Please return the completed form - **Preferably before 28 June 2019** - by mail or email together with your payment to:

FICPI 18th Open Forum
c/o ENIC meetings & events srl
Piazza Adua, 1/d
50123 FIRENZE, ITALY

Tel: +39 055 2608941
Email: ficpi@enic.it

YOU CAN ALSO REGISTER **ONLINE** at: www.ficpi.org/forum-registration

Please note: Registration forms must be accompanied by payment (copy of money order or credit card authorisation).

Forms received without payment cannot be processed.

Delegate Information

FIRST NAME	_____	LAST NAME	_____
TITLE	Mr Mrs Ms Dr	POSITION	_____
COMPANY/FIRM	_____	ADDRESS	_____
POSTAL CODE	_____	CITY	_____
COUNTRY	_____	VAT/TAX ID No.	_____
TELEPHONE	_____	FAX	_____
EMAIL	_____		(required for ENIC to provide vouchers/invoices)
MOBILE	_____		(for notifications regarding the working programme)
SDI CODE	_____		(for Italian registrants only)

Billing Information

The invoice will be issued to the person and address indicated in the DELEGATE INFORMATION above.

If the invoice should be issued in a different name or sent to a different address, please complete the information below.

NAME	_____	(Name of Person, Firm or Organization)
EMAIL	_____	(required for ENIC to provide vouchers/invoices)
ADDRESS	_____	POSTAL CODE _____
CITY	_____	COUNTRY _____
TELEPHONE	_____	FAX _____
VAT/TAX ID No.	_____	
SDI CODE	_____	(for Italian registrants only)

Delegate's Guests Information

GUEST 1

Mr Mrs Ms Dr FIRST NAME _____ LAST NAME _____

GUEST 2

Mr Mrs Ms Dr FIRST NAME _____ LAST NAME _____

Dietary Restrictions

DELEGATE _____

GUEST 1 _____

GUEST 2 _____

Registration Details

DELEGATE'S NAME _____

REGISTRATION FEES

Payment in EURO (€)

Please select relevant category and indicate corresponding amount below.

	Before 28 June 2019	After 28 June 2019
Delegate FICPI Member	€1.700	€2.000
Delegate NON Member	€2.050	€2.350

FORUM DELEGATE REGISTRATION FEE (see above) € _____

OPEN FORUM PRESENTATION BOOK - HARD COPY _____ x €40 € _____

SPECIAL DISCOUNTS FOR DELEGATES*

FIRST-TIME ATTENDEE - €100 € _____

OR SECOND/SUBSEQUENT FIRM REPRESENTATIVE - €100 € _____

FORUM DELEGATE'S GUEST REGISTRATION FEE

NUMBER OF DELEGATE'S GUESTS _____ x €1.150 € _____

SPECIAL DISCOUNTS FOR DELEGATE'S GUESTS*

SECOND/SUBSEQUENT DELEGATE'S GUEST - €100 € _____

OR DELEGATE'S YOUNG GUEST (AGED 18 OR YOUNGER) - €300 € _____

* Please note that discounts cannot be accumulated.

SUBTOTAL € _____

OPTIONAL TOURS

Wednesday, 9 October – Half-day visit

SCHÖNBRUNN PALACE persons _____ x €100 € _____

Saturday, 12 October – Full-day excursions

#1 THE DANUBE VALLEY persons _____ x €260 € _____

#2 SPANISH RIDING SCHOOL PERFORMANCE persons _____ x €260 € _____

#3 SPORTING ACTIVITY: GOLF** persons _____ x €310 € _____

#4 SPORTING ACTIVITY: MOUNTAIN BIKING*** persons _____ x €160 € _____

** Cart included. If you need to rent clubs, please contact ENIC Meetings & Events: ficpi@enic.it

*** Bike included. Please bring your bike dress, shoes and gloves. If you need to rent a helmet, please contact ENIC Meetings & Events: ficpi@enic.it

HOTEL BOOKING

AUSTRIA TREND SAVOYEN VIENNA	Deluxe	€160 single	€180 double
	Executive	€205 single	€225 double
	Suite	€240 single	€260 double
	Executive Suite	€280 single	€300 double

Please select a category of room and indicate single or double occupancy. Prices are per room per night, inclusive of breakfast, service and VAT. City tax is not included.

ACCOMMODATION BOOKING FEE: €15 (PER ROOM, FOR THE WHOLE STAY) € _____

TOTAL AMOUNT PAYABLE FOR REGISTRATION € _____

Hotel Booking Details

DELEGATE'S NAME _____

Please indicate the nights for which you wish to book accommodation.
If you wish to extend your stay, please contact ENIC Meetings & Events: ficpi@enic.it

Sunday, 6 October 2019	Wednesday, 9 October 2019	Saturday, 12 October 2019
Monday, 7 October 2019	Thursday, 10 October 2019	
Tuesday, 8 October 2019	Friday, 11 October 2019	

In order to guarantee early check-in or late check-out, an additional night has to be reserved and paid for.

A **credit card** is required as a guarantee upon booking; a **signed authorisation** for the hotel to charge your **credit card** in case of no-show or late cancellation (**after 2 September 2019**) – e.g. cancellation of all or part of the stay – is also required. Please note that **without this signed authorisation** (see the section below), **your accommodation CANNOT be guaranteed**.

NEW MEMBER/FIRST-TIME ATTENDEE RECEPTION

Wednesday, 9 October

I WISH TO PARTICIPATE IN THE NEW MEMBER/FIRST-TIME ATTENDEE RECEPTION: YES NO

I AM: A NEW MEMBER OF FICPI
 NOT A MEMBER OF FICPI
 ATTENDING MY FIRST FICPI FORUM

PAYMENT

BANK TRANSFER (NET OF BANK CHARGES) – PAYABLE TO ENIC MEETINGS & EVENTS
ACCOUNT # 100000001306
CASSA DI RISPARMIO DI FIRENZE, AG. 6, VIA NAZIONALE 93 R – FIRENZE, ITALY
IBAN CODE: IT14 M030 6902 9041 0000 0001 306
SWIFT CODE: BCITITMM

NB: Please attach a copy of the money order to the registration form (and retain a copy for your files).

CREDIT CARD

VISA MASTERCARD

CARD NUMBER _____ CV2 CODE _____
EXPIRY DATE _____ NAME ON CARD _____

I authorise **ENIC meetings & events** to charge my credit card for the **TOTAL** amount payable for registration, as set out above.

DATE _____ SIGNATURE _____

HOTEL BOOKING GUARANTEE – CREDIT CARD

VISA MASTERCARD

CARD NUMBER _____ CV2 CODE _____
EXPIRY DATE _____ NAME ON CARD _____

I authorise the **AUSTRIA TREND SAVOYEN VIENNA** to charge my credit card for the full amount of my stay in case of any cancellation after **2 September 2019** or in case of **no-show** as per the cancellation policy.

DATE _____ SIGNATURE _____

AUTHORISATION

I hereby authorise FICPI at the event to take photos and videos containing my face, which photos and videos may be used in FICPI's printed and electronic publications.

AND

I hereby authorise ENIC Meetings & events to use all registration data given on this form for a computerised handling of this conference.

I agree to the conditions mentioned in the brochure. I have read and accept the cancellation terms, disclaimer and insurance recommendations.

DATE _____ SIGNATURE _____