



**FIABCI
COLOMBIA**

FIABCI Young Members Conference

Capilla del Mar Hotel

Thursday, August 21st - 23rd, 2008

Cartagena de India, Colombia

Registration Form

Participant name:

Position (Title):

Company:

Name to be used in Name Tag:

Name accompanying Person name:

Name of Accompanying Person to be used in Name Tag:

Telephone number:

Fax number:

e-mail:

Complete Address (Street / Number / Complement / ZIP Code):

City:

State / Province:

Country:

Receipt issued on behalf of:

The congress fee is USD200. It includes a welcome cocktail and all conferences.

Payment Method:

Bank wire to FIABCI COLOMBIA NIT No. 860.050.983-9:

SWIFT Code BSCHCOBB - Citibank NY, City USA33

ABA Code 021000089 - Account10922914

BANCO SANTANDER - Account 21303726-0

Observations

1. Payment in USD
2. Bank wires should only be made to above mentioned account.
3. Cancellations are accepted in writing. If made 3 business days in advance, 75% of the fee will be reimbursed.
4. For cancellations in writing 1 business day in advance, 50% of the fee will be reimbursed.
5. For cancellations in writing within 24 hours, no reimbursement will be made.
6. Program subject to change without notice.
7. Registration will be closed 2 business days prior to the event.

City: _____

Date: ____/____/____

Signature: _____