

INTERNATIONAL BASIC NEUROSURGERY COURSE

TERM I, COURSE I

14-17 March 2012

TOPKAPI PALACE HOTEL, ANTALYA - TURKEY

NAME, SURNAME:

TITLE:

INSTITUTION:

PHONE: FAX:

E-MAIL:

INSTITUTION / COMPANY NAME:

ADDRESS:

TAX OFFICE:

TAX NO:

Registration with Accommodation :-€

One Way Transfer Fee (Airport - Topkapı Palace Hotel) :-€

Round - Transfer Fee (Airport - Topkapı Palace Hotel - Airport) :-€

TOTAL AMOUNT :-€

METHODS of PAYMENT

1- Bank Wire Transfer

Bank : Is Bank Branch : Rıhtım Ticari Şubesi (1394) Account Name : K2 Congress Org. Serv.

Account Number : 1394 - 000 9269 Euro SWIFT Code : ISBKTRISXXX

Reference : Name of delegate or sponsor company name Iban code : TR15 0006 4000 0021 3940 0092 69

•A copy of the receipt of the bank remittance should be attached to the Registration Form.

•All bank charges for remittance must be done by the remitter.

2 - Credit Card Form for Individual Reservations

Card Type: ☐ Visa ☐ Mastercard

Card Holder's Name :

Card Holder's Surname :

Credit Card No :

Expire Date :

CVC code (3 last digits near the signature) :

Amount :

I hereby authorize "K2 Congress" to debit my credit card account with the total value of the items booked by me.

Date:/...../..... Name Surname: Signature:.....



K2 Conference and Event Management

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