



ICNAAM 2012

CONFERENCE REGISTRATION-ACCOMMODATION FORM

Hotels Kypriotis – Kypriotis International Conference Center, Greece, 19-25 September 2012

| | | A. CONFEREN | CE REGISTRATIO | N FORM | | | | |
|----------------------|--|--|---|--|-------------------------------|---|--|--|
| Title Mr [| Mrs Dr Prof S | urname | First Name | | | | | |
| Address | | | | City | | | | |
| Country | | Postcode | | | | | | |
| Telefax | | Mobile Ph | | Email | | | | |
| Name of Aco | companying Person(s), | if any: | | | | | | |
| 1) Title \square M | r Mrs Dr Prof | Surname | | First Name | | | | |
| 2) Title \square M | r Mrs Dr Prof | Surname | | First Name | | | | |
| 3) Title M | r Mrs Dr Prof | Surname | | First Name | | | | |
| 4) Title \square M | r Mrs Dr Prof | Surname | | First Name | | | | |
| 5) Title M | r Mrs Dr Prof | Surname | | First Name | | | | |
| | | | | | | İ | | |
| | | | Price Table | 1 | | Ì | | |
| | | Early Registration (Until 15 April 2012) | Normal Registration (Until 15 June 2012) | Late Registration (Until 31 July 2012) | On Conference Registration | | | |
| | Students | €320 | €340 | €360 | | | | |
| | Participants from Developing Countries | €360 | €390 | €400 | | | | |
| | Participants from all over the World except Developing Countries | €430 | €475 | €500 | €560 | | | |

Write the amount you pay as Subtotal A: Registration

| SUBTOTAL A |
|------------|
|------------|

CANCELLATION POLICY FOR THE REGISTRATION

- Author registrations cannot be returned after July 25, 2012.
- All other refund requests must be in writing and received before July 22, 2012.
- A 60 Euro cancellation fee will be deducted from the registration fees.

• Substitution of one conference attendee for another will be accepted at any time, on the basis of information of the change via e-mail (tsimos.conf@gmail.com with a carbon copy to tsimos.conf@gmail.com) (the submission to both addresses is requested)).

Payments details

The payments will be done via KEPENHAM HOLDING LTD as is described below. In the case of Bank Transfer and in order the registration to be valid, the Bank Slip of the Bank Transfer is necessary. Your registration is not valid if the Bank of the Bank Transfer is not included (in the case of Bank Transfer).

B. CONFERENCE ACCOMMODATION FORM

| lease indicate your hotel choice as outlined Hotel Name (the entitled Half Board meal is dinner All Inclusive supplement: €30 per p Kipriotis Village Resort Kipriotis Panorama Hotel&Suites | for all the hotels) erson per day | website [| Room 1 | Гуре | Dates | | |
|--|--|--------------|-------------------------------|----------------------|---|--|--|
| (the entitled Half Board meal is dinner **All Inclusive supplement: €30 per p Kipriotis Village Resort | erson per day | [| | Гуре | Dates | | |
| All Inclusive supplement: €30 per p Kipriotis Village Resort | erson per day | [| | Гуре | Dates | | |
| Kipriotis Village Resort | ☐ HB ☐ AI | [| | | | | |
| | |] [| Single | | | | |
| Kipriotis Panorama Hotel&Suites | | l - r | | | | | |
| Kipriotis Panorama Hotel&Suites | | | | | In | | |
| | Kipriotis Panorama Hotel&Suites | | | dult | | | |
| Kipriotis Hippocrates Hotel | | | Triple with ch | nild | Out | | |
| | | | — · ☐ Non paving ir | nfants/children | A total of () | | |
| Kipriotis Panorama Aqualand | HB AI | , | Paying child(| | Nights | | |
| | | _ | (Ages:) | City | | | |
| | | | | | | I | |
| Hotel names & room rates in Euros HE Kipriotis Village | B Hotel nam | nes & room | rates in Euros | НВ | Extra person policy in double room: - Children between infants to 6 years old: free of charg | | |
| Sgl 105 | | priotis Hipp | ocrates | | | | |
| Dbl 135 Triple with adult 182. | | Sgl Dbl | | 95 115 | their parents room | | |
| Triple with child 168. | | Triple with | | 155.25 | Children between 6 - 12 ye adult price in double room, | ars old: 50% discount on when sharing their pare | |
| Kipriotis Panorama Hotel & Suites | | Triple with | child | 143.75 | room | when sharing their pare | |
| Sgl 105 | | tis Panoran | na Aqualand | | - Adult: 30% discount on the | e per person price in dou | |
| Dbl 139 | | Sgl Dbl | | 95 115 | room | | |
| Triple with child 168. | 75 | Triple with | | 155.25 | | | |
| Kipriotis Maris Sgl 105 | 5 | Triple with | child | 143.75 | | | |
| Dbl 135 | 5 | | | | | | |
| Triple with adult 182. Triple with child 168. | | | | | | | |
| ANCELLATION POLICIES | | | T | | | | |
| I have read and accepted the cancella form and on the ICNAAM 2012 web site | tion terms mentioned | on this | Hotel Cancell | ations | | | |
| Signature: | | | 21 days in | advance: no cancella | ation fee | | |
| Date: | 20 to 14 days in advance: one night cancellation fee | | | | | | |
| | | | Less than | 14 days or no shows | : 100% of all nights stay cancellation | fee | |

Payments details

The payments will be done via KEPENHAM HOLDING LTD as is described below. In the case of Bank Transfer and in order the booking to be valid, the Bank Slip of the Bank Transfer is necessary. The Hotel reserves the right to cancel your reservation without notice if payment is not made on time and if the Bank of the Bank Transfer is not included (in the case of Bank Transfer).

PAYMENT

Please complete this section to guarantee your registration. We mention that without this

| guarantee your registration isn't recognized | | | | | | |
|--|--|--|--|--|--|--|
| 1. By Bank Transaction Bank Bank Address Account Number IBAN Code BIC Under the Name of | : Bank of Cyprus : IBU, Paphos, Cyprus : 0655-01-030079 : CY56 0020 0655 0000 0001 0300 7900 : BCYPCY2N : KEPENHAM HOLDING LTD | | | | | |
| After payment of registration fees by Bank Transaction you have to send the receipt of the Bank slip for Bank Transfer with this form to the fax: ++302109420091. THIS IS NECESSARY IN ORDER YOUR REGISTRATION TO BE VALID. For the payments with Bank Transfer via your organization, the VAT number is requested (for participants from Europian Union): VAT NUMBER | | | | | | |
| Address KEPENHAM HOL KEPENHAM HOLDING LT 1 Pallados Street, 8046 Paphos CYPRUS VAT: CY 10232044A | | | | | | |
| 2. By Credit Card Name of the Card Holder | Billing Address | | | | | |
| Country | City Post Code | | | | | |
| CreditCard Cre | dit Card Number Expire Date CVC Num. | | | | | |
| Taxes plus charges 6% for Mas | stercard, Visa, Maestro. Attention: American Express credit cards are not accepted | | | | | |

Important Notice:

| ATTEN | ITION: THI | S FORM MU | UST BE <u>COMPLETE</u> | D ELE | CTRC | <u>NICALY</u> | AND | MUS1 | r be sen | T TO THE SE | CRETARY OF ICNAAM TO | THE |
|---------------|------------|-----------|------------------------|-------|-------|---------------|-----|------|----------|-------------|-----------------------|-----|
| FAX | NUMBER | (GREECE) | ++302109420091 | or | via | e-mail | to | the | e-mail | addresses: | tsimos.conf@gmail.com | or |
| <u>tsimos</u> | s.conf09@ | gmail.com | | | | | | | | | | |
| Date | | | | | Signa | iture _ | | | | | | |

Remarks on Registration

For accompanying persons, please add 55 Euros for each additional seat in the Central Dinner and 45 Euros for each additional seat in the Excursion.

(*) For the students a confirmation signed by their supervisor is needed. This confirmation must be send to the fax number: ++ 30 210 94 20 091 together with the information that the fees has been paid.

An informal email to <u>tsimos.conf@gmail.com</u> with a carbon copy to tsimos.conf09@gmail.com must be send.

Important Notice: Failure to fax the above requested letter will render the registration incomplete.

(**) With the term developing country we mean any country except USA, Canada, EU and other Western European nations, Japan, Australia and New Zealand. (***) The extended abstracts of the cases (i), (ii), (iii) will be included in the Proceedings of ICNAAM 2012 (published in AIP (American Institute of Physics) Conference Proceedings).

We note that our policy for the presentation of more than one papers is the following:

For one paper (1): 1 registration fee

For two papers (2): 1.5 registration fees For three papers (3): 2 registration fees For four papers (4): 3 registration fees

The Conference doesn't permit the publication of more than 4 papers with the same author(s).

Conference dinner

A conference dinner is planned during the conference and accompanying persons are most welcome to come along with you. With your registration, you are already entitled to the conference dinner and do not need to pay any fees. If you will be coming with extra accompanying persons, please reserve a number of additional seats here (55 Euros per seat).

Excursion

An excursion is planned during the conference and accompanying persons are most welcome to come along with you. With your registration, you are already entitled to the conference excursion and do not need to pay any fees. If you will be coming with extra accompanying persons, please reserve a number of additional seats here (45 Euros per seat).

You can send the registration form via e-mail (tsimos.conf@gmail.com) or tsimos.conf09@gmail.com). If you do not wish to send the registration form on the net, you can use the text version of this form. You must send the text version via regular mail and fax.

Regular Mail

The postal mail address for notifying us how to clear your payment is:

Secretary of ICNAAM 2012 (Attn: Mrs. Eleni Ralli) 10 Konitsis Street, Amfithea - Paleon Faliron, GR-175 64 Athens, Greece

Please use also the above address in order to send the text version of this form.

<u>Fax</u>

In order to send the text version of this form is:

Fax of the Secretary of ICNAAM 2012:

++ 30 210 94 20 091

Please indicate on your fax that it is for the attention of the ICNAAM 2012 organisers.

An informal email to <u>tsimos.conf@gmail.com</u> with a carbon copy to <u>tsimos.conf09@gmail.com</u> must be send.

If you request a receipt now (otherwise receipt will be issued at the conference) please note it here:

- (1) If you want to send the text version of this form, you must use BOTH regular mail and fax
- (2) Registration will not be effective until:
- (a) receipt of the Bank slip for Bank Transfer (Method 1).

After payment of registration fees an informal e-mail to the Secretary of ICNAAM at tsimos.conf@gmail.com with a carbon copy to tsimos.conf09@gmail.com should be send and a copy of Bank slip should be send to

(i) the postal address of the Secretary of ICNAAM (Secretary of ICNAAM 2012 (Attn: Mrs. Eleni Ralli), 10 Konitsis Street, Amfithea, Paleon Faliron, GR-175 64 Athens, Greece)

and

- the fax of the Secretary of ICNAAM 2012: ++ (ii) **30** 210 94 20 091 An informal email to tsimos.conf@gmail.com with a carbon copy to tsimos.conf09@gmail.com must be send.
- (b) receipt of a message from us that your card has been charged effectively (Method 2) .
- (3) All payments must be "free of any charges for the payee", i.e. all bank charges have to be borne by the sender.

Receipt for your payment

I request a receipt now (otherwise receipt will be issued at the conference)

| I have read all the above remarks and cancellation policies for both registration and accommodation | | | | | | | | |
|---|-----------|--|--|--|--|--|--|--|
| Date | Signature | | | | | | | |