



5-6 October 2017

"Ioannis Vellidis Congress Centre" Thessaloniki, Greece

REGISTRATION FORM

PARTICIPANT INFORMATION

To register for the THESSALONIKI SUMMIT 2017, please fill in this form (CAPITAL LETTERS) and return it to the Federation of Industries of Northern Greece, 1, Morihovou sqr., 54625, Thessaloniki, GREECE, tel. 0030 2310 539817, fax. 0030 2310 541933, email: thessalonikisummit@sbbe.gr

SURNAME		FIRST NAME
JOB TITLE		COMPANY
PARTICIPATION FEE		
250€ (plus 24% VAT), Summand participation to the offi	•	which includes Summit material and simultaneous translation 5/10 & Friday 6/10).
☐ 180€ (plus 24% VAT), Summand participation to the offi	•	which includes Summit material and simultaneous translation lay (Thursday 5/10).
☐ 90€ (plus 24% VAT), Partici Speaker Mr. Alexis Tsipras,		inner of the second day (Friday 6/10) with Guest of Honor & ellenic Republic.
METHODS OF PAYMENT		
Please select one of the below pa participation cost.	yment methods. In case o	of cancellation after October 2 nd , you will be charged with the total
lacksquare By check payable to the Federat	ion of Industries of North	ern Greece
☐ Cash at the Federation of Indust	ries of Northern Greece	
	2 2190 0052 1900 2733 03	the Piraeus Bank, beneficiary: Federation of Industries of Northern 30. It is necessary that your company name or your name (for private
IMPORTANT: In case of bank depo	sit, please send us a copy	of the appropriate receipt from the bank by fax or email.
ΣΤΟΙΧΕΙΑ ΤΙΜΟΛΟΓΗΣΗΣ Ι	NVOICING INFORMA	TION
ETAIPIA / COMPANY		
ΔΙΕΥΘΎΝΣΗ / ADDRESS		ΠΟΛΗ / CITY
TK / POST CODE		XΩPA / COUNTRY
AΦM / REG. No		Δ.O.Y. / TAX OFFICE
THΛ. / TEL.	FAX	Email:

ACCOMMODATION

The organizers have secured special rates for participants to book rooms during the conference dates. For further information please visit our website: $\underline{\text{www.thessalonikisummit.gr}}.$



Morichovou Sq. 1