



# Registration Form



## EADTU Annual Conference Madrid “E-Bologna” progressing the European Learning Space

Madrid, 6 - 8 November 2003

Date of registration: .....  
 I already signed up by using the response card of the invitation

I will attend the conference Yes  No   
**Name** ..... **Telephone** .....  
**Institute** ..... **Fax** .....  
**Address** ..... **E-mail** .....  
 .....

Next to the Plenary Sessions I want to register for the following Parallel Sessions\* on Friday the 7<sup>th</sup> of November 2003  
**ONE SESSION PER TIMESLOT: PLEASE INDICATE ALSO A 2<sup>ND</sup> CHOICE**

<b>Timeslot A</b> 11.00 – 12.00	<input type="checkbox"/> I A <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> II A <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> III A <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> IV A <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> V A <input type="checkbox"/> 2 <sup>ND</sup> choice
<b>Timeslot B</b> 12.30 – 14.00	<input type="checkbox"/> I B <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> II B <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> III B <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> IV B <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> V B <input type="checkbox"/> 2 <sup>ND</sup> choice
<b>Timeslot C</b> 15.30 – 16.30	<input type="checkbox"/> I C <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> II C <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> III C <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> IV C <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> V C <input type="checkbox"/> 2 <sup>ND</sup> choice
<b>Timeslot D</b> 16.30 – 18.00	<input type="checkbox"/> I D <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> II D <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> III D <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> IV D <input type="checkbox"/> 2 <sup>ND</sup> choice	<input type="checkbox"/> V D <input type="checkbox"/> 2 <sup>ND</sup> choice

(\* - See programme-overview for full details)

I will also take part in:		Special requests:
Thursday 6 <sup>th</sup> of November	<input type="checkbox"/> Welcome Reception Crystal Palace <input type="checkbox"/> Dinner	
Friday 7 <sup>th</sup> of November	<input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	
Saturday 8 <sup>th</sup> of November	<input type="checkbox"/> Lunch	



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### Conference Fee

The fee for this event covers conference attendance for three days, all written materials, lunches, dinners and refreshments. Please make sure you register in time as the number of participants is limited.

(Please tick the box of the registration that applies to you)

Fee	EADTU members	Non-EADTU members
Registration <b>before</b> 1 <sup>st</sup> October 2003 Payment must be in <b>before</b> 17 <sup>th</sup> of October:	<input type="checkbox"/> €300,00	<input type="checkbox"/> €400,00
Registration <b>after</b> 1 <sup>st</sup> October 2003 Payment <b>before deadline</b> 1 <sup>st</sup> of November	<input type="checkbox"/> €350,00	<input type="checkbox"/> €400,00

### Cancellation policy:

In case of cancellation before **1<sup>st</sup> October 2003** 90% of the paid amount will be refunded. After 1<sup>st</sup> October, but before 20<sup>th</sup> October 2003 40% of the fees will be refunded. No refund can be given after 20<sup>th</sup> October 2003.

Please transfer the corresponding amount in Euros only. (Cash payments at the event are not possible.)

**ABN AMRO Bank**

Heerlen – the Netherlands

swiftcode ABN ANL 2R

IBAN: NL93ABNA0455235503

accountnr. 45.52.35.503

**Attn: EADTU**

Heerlen - the Netherlands

please mention your name and institution

### Note

If you are booking flights by Iberia, please ask the EADTU secretariat for the conditions of the reduced ticket fees.

**Please return this form to the EADTU Office by fax, attn. Marion Lenaerts:**

**Fax: \*\*- 31 45 5741473 or E-mail [marion.lenaerts@eadtu.nl](mailto:marion.lenaerts@eadtu.nl)**