

ICPR 2010
20th International Conference on Pattern Recognition
23 - 26 August, 2010
ISTANBUL – Turkey

Please return this form to:

TeamCon Congress Services Worldwide
 Halaskargazi Cad. Alp Palas Apt. No. 25/1 34371
 Harbiye – Istanbul / TURKEY
 Tel : +90 212 343 80 03
 Fax : +90 212 343 80 23
 Email : registration@icpr2010.org
 Web : www.teamcon.com.tr

TRANSFER REQUESTS

	Date	Flight Number	Time of Arrival/Departure	Pax	Price
1. Arrival Flight	_____	_____	_____	_____	45 €
2. Departure Flight	_____	_____	_____	_____	45 €
SUB TOTAL EUROS					<input type="text"/>

Above prices are inclusive of 18% VAT. Congress has right to vary the quoted prices in accordance with any movements in the legislated rate of VAT.

CANCELLATION POLICIES

ALL CANCELLATIONS must be sent in writing to TeamCon Congress Services Worldwide.

REGISTRATION CANCELLATIONS made;

Within July 24th, 2010 : the paid amount will be refunded with a deduction of 50 EUR for administrative charges.
 After July 24th, 2010 : the total amount will be forfeited and no refund will be possible.

ACCOMMODATION CANCELLATIONS made;

Within March 26th, 2010 : the paid amount will be refunded with a deduction of 10% for administrative charges.
 March 27th – May 28th 2010 : the paid amount will be refunded with a penalty of 1 night accommodation fee.
 May 29th – July 2nd 2010 : the paid amount will be refunded with a penalty of 2 night accommodation fee.
 After July 2nd 2010 : the amount of full stay will be forfeited and no refund will be available.

TRANSFER CANCELLATIONS made;

Within August 17th, 2010 : the paid amount will be refunded without any penalty.
 After August 17th, 2010 : the total amount will be forfeited and no refund will be possible.

All refunds will be processed after the ICPR 2010.

PAYMENT TERMS

* All payments are to be made in EUR.

** To benefit from early registration fees please make sure that the payment is received by the Congress Secretariat before May 14th, 2010.

1. BANK TRANSFER - The bank transfer should be exclusive of any charges. Please make sure to indicate ICPR 2010, participant's name and all below details on the bank transfer form. A copy of the transaction statement should be faxed with this form to TeamCon Congress Services Worldwide at +90 212 343 80 23

IMPORTANT NOTE: Please do not forget to bring a copy of the bank transaction statement as proof of payment.

Account Name : TEAMCON CONGRESS SERVICES WORLDWIDE
Bank Name : EUROBANK TEKFEN A.S.
Branch Name : TAKSIM BRANCH
Branch Code : 9370
Account No. : 185430-509
IBAN No. : TR460012509370001854305090
SWIFT Code : TEKFTRIS937
Indicate : FAMILY NAME - NAME & ICPR 2010

2. CREDIT CARDS Visa MasterCard/Euro Card American Express

Name of the card holder (as it appears on your card) _____

Credit Card No _____ / _____ / _____ / _____

Expiry Date ____ / ____ (Month /Year) Security Code (CVC) ____ / ____ / ____

Please indicate the last three digit security code on the back of your credit card.

GRAND TOTAL EUROS

Having signed below, I herewith confirm that I have read and am fully aware of the cancellation policy stipulated. I hereby authorize TeamCon to debit the above mentioned credit card account with the total value of the items booked by me on this form.

Date ____ / ____ / ____ (DD / MM / YY) Signature _____

Card holder's address _____