

# Application Form Complaint Resolution 30<sup>th</sup> November 2018

## PARTICIPANT INFORMATION

Mr  Mrs  Ms

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

(PLEASE RETURN BY FAX TO 25 588 299 or email to [info@wtccy.org](mailto:info@wtccy.org))

## PARTICIPATION FEE

Eligible for HRDA subsidy: **€36 + €22.80 VAT**

Not eligible for HRDA subsidy: **€120 + €22.80 VAT**

**Total:** € ..... + €22.80 VAT

**Signature:** \_\_\_\_\_

PARTICIPATION FEE PER DELEGATE (includes handouts, certificate, coffee breaks and lunch)

## METHODS OF PAYMENT

## CANCELATION POLICY

VISA  AMEX  MASTECARD  OTHER

Credit Card Number:  Exp. Date: ...../.....

Card Holder's name: \_\_\_\_\_

Amount:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**By cheque**

Please post your cheque to World Trade Center (Cyprus) Ltd,  
P.O Box 58023, Limassol, 3730, Cyprus

**Bank Transfer**

Please be informed that all bank charges are at your own expense.

**Account Name:** World Trade Center (Cyprus) Ltd

**Bank:** Bank of Cyprus

**Account Number:** 0357024468998

**IBAN:** CY36002001950000357024468998

**SWIFT BIC:** BCYPCY2N

- Confirmation of your registration will be sent once registration form is received and full amount is paid in advance and not later than 15<sup>th</sup> October 2018
- In the case you are unable to attend we would be glad to welcome a colleague in your place. However if you are forced to cancel, we should be notified 3 working days in advance. In this case 50% cancellation fee will apply. In any other case no refund is allowed.
- Organisers reserve the right to cancel or change the date of the seminars according to their discretion.