

## REGISTRATION & ACCOMMODATION FORM

Please complete this form and return it to **Spektar putovanja d.o.o., Hebrangova 34, Zagreb, Croatia**  
F: + 385 1 4862 622, E: [petra@spektar-holidays.hr](mailto:petra@spektar-holidays.hr)

PLEASE USE BLOCK LETTERS

### PARTICIPANT INFORMATION

Family name: ..... First name: ..... Title: .....

Institute: .....

Address ..... City: .....

ZIP Code: ..... Country: .....

Phone: ..... E-mail: ..... Fax: .....

Programme ID code(s): .....

Only for active participants in programme accepted by the Organizer.

If you are participating in more than one performance please include all the ID codes from your applications.

### CONGRESS REGISTRATION FEE

CATEGORY	EARLY BIRD UNTIL 31.01.2018.	LATE BIRD & ONSITE FROM 01.02.2018.	CATEGORY DESCRIPTION
PERMANENT PASS #1	160 EUR	180 EUR	<ul style="list-style-type: none"> <li>Active participants</li> <li>Visitors</li> </ul>
PERMANENT PASS #2	130 EUR	150 EUR	<ul style="list-style-type: none"> <li>Musicians other than saxophonists and other programme participants</li> <li>Students*</li> </ul>
PERMANENT PASS #3	110 EUR	130 EUR	<ul style="list-style-type: none"> <li>A group of 15 or more musicians participating in the same programme</li> </ul>
THREE DAY PASS	100 EUR	100 EUR	<ul style="list-style-type: none"> <li>Three consecutive days (visitors only)</li> </ul> <p>From: _____ To: _____</p>
DAILY PASS	50 EUR	50 EUR	<ul style="list-style-type: none"> <li>Visitors only</li> </ul>
OPEN DAY EDUCATIONAL 14.07.	30 EUR	30 EUR	

Students\*: the student application has to be accompanied by written proof of status; otherwise low fee will not be validated. Participants from Croatia pay registration fee in HRK (Croatian kuna) at the bank medium exchange rate on the date of payment. Each registered participant gets a pass enabling their access to all events within the Congress (concerts, exhibitions, opening day welcome reception, welcome bag, programme catalogue, T-shirt with the Congress logo, as well as various advertising materials.

## HOTEL BOOKING

HOTEL	SINGLE ROOM	DOUBLE ROOM
HOTEL WESTIN	■ 112,00 EUR	■ 133,00 EUR
HOTEL DUBROVNIK	■ 104,00 EUR	■ 127,00 EUR
HOTEL GARDEN	■ 92,00 EUR	■ 92,00 EUR
HOTEL JADRAN	■ 74,00 EUR	■ 88,00 EUR

Arrival date: ..... Departure date: ..... Number of nights: .....

For double room please indicate the first and last name of the person you are sharing the room with:

.....

Price is per room and day. Price includes bed/breakfast, city tax.

## TRANSFERS BOOKING

I would like to book transfer(s) from / to airport:

■ **ARRIVAL:**

Date .....

Flight number .....

Arrival time .....

Additional person .....

■ **DEPARTURE:**

Date .....

Flight number .....

Departure time .....

Additional person .....

Price: 30 EUR one way for 1 – 3 persons in the same car

## INVOICE INFORMATION

All Congress expenses will be covered by participant

In case your company / institution is covering all or some expenses, please complete the following information:

Institution / Company: .....

VAT NO: .....

Address: .....

City: .....

Zip code: .....

Country: .....

Phone: .....

E-mail: .....

Registration fee

Accommodation

Transfers

## METHODS OF PAYMENTS

**BY BANK TRANSFER:**

bank transfer should be made payable to technical organizer Spektar putovanja d.o.o. and should include ref. Number 005/003/2018

**Account information for payment in EUR**

Spektar putovanja d.o.o.  
ZAGREBACKA BANKA ZAGREB  
IBAN HR1323600001500395457  
SWIFT ZABA HR 2X

**Account information for payment in kuna**

Spektar putovanja d.o.o.  
ZAGREBACKA BANKA ZAGREB  
IBAN HR3923600001101441264

All Bank service charges shall be paid by the participant.

**BY CREDIT CARD OFFLINE**

American Express

Diners Club International

Eurocard/Mastercard

Visa

Credit card number .....

Expiry date: Month ..... / Year ..... CVV # .....

Signing below I authorize Spektar putovanja to debit this credit card account for the total amount due

Credit card owner's name .....

Signature ..... Date.....

Having signed below I herewith confirm that I have read and I am fully aware of the cancellation conditions. I hereby authorize Spektar putovanja to debit this credit card account for the total amount due.