

REGISTRATION FORM

REPLY TO:

e-mail: scharrer@bhdt.at
fax: +43-3862-303-104

4th BHDT UREA CONFERENCE 2017

October 4th to 6th
Salzburg, Austria

Please return the form to Mrs. Christine Scharrer by e-mail to scharrer@bhdt.at or fax to +43-3862-303-104
Early Bird: End of April 2017. Regular Fee: End of July 2017.

Please complete in block letters:

Company Name: _____

Business Address: _____

Postal Code: _____ City: _____

Country: _____

Title: _____

First Name: _____ Last Name: _____

Badge Name: _____

Job Title: _____ Mobile Phone: _____

Telephone Number: _____ Telefax Number: _____

E-mail Address: _____

HOTEL RESERVATION:

Hotel Crowne Plaza Salzburg - The Pitter, Rainerstraße 6, 5020 Salzburg.

Transportation costs from airport to hotel must be borne by yourself.

Airport Salzburg Airport Munich

Time of arrival: _____

Flight number: _____

If you need visa support please do not hesitate to contact us.

Date

Signature