

3rd International Conference on Polymer Tribology
PolyTrib
CONFERENCE REGISTRATION FORM
Portorož, Slovenia

Date **24th and 25th of September 2018**
 Venue **Grand Hotel Bernardin, Portorož, Slovenia**

1. Participants information (also for invoice)

☐ Mr. ☐ Ms. ☐ Mrs. Title: _____

Family name: _____

First name: _____

Organisation: _____

Address: _____

Postal/Zip code: _____ City: _____

Country: _____

Telephone: _____

Fax: _____ E-mail: _____

2. Conference Fee

	EARLY FEE (until 29.6.2018)	STANDARD FEE (after 29.6.2018)
GENERAL	280 €	330 €
STUDENT	250 €	250 €

All prices include VAT!

Student YES / NO
Accompanying person (attendance fee: 100 €) YES / NO

Registration fee includes:

- Admission to the Scientific sessions & Exhibition Area
- Conference Material
- Coffee breaks
- Lunch and Gala Dinner

Accompanying person fee includes:

- Lunch and Gala Dinner

3. Hotel Reservations

Participants have to make their own accommodation booking. More information about booking at www.tint-polytrib.com

4. Payment

Please print this registration form and e-mail it to the Conference Secretariat together with the proof of payment.

Transfer the total amount of the conference fee to the **Slovenian Society for Tribology**'s bank account at:

Nova Ljubljanska banka, d.d., Ljubljana, Trg republike 2, 1520 Ljubljana

- Account number: 02045-0018107278
- IBAN number: SI56 0204 5001 8107 278
- SWIFT-code: LJBASI2X
- VAT number: 63591235
- Important notice: Bank Transfers must be free of charge for the receiver.
- On-site registration: Payments possible by cash only (EUR)
- The official invoice will be send after the payment is received!

Date: _____

Signature: _____

Conference Secretariat

Slovenian Society for Tribology
Joži Sterle
Bogišičeva 8
1000 Ljubljana
SLOVENIA

Phone: +386 1 4771 460
Fax: +386 1 4771 469
E-mail: polytrib@tint.fs.uni-lj.si
Web: www.tint-polytrib.com

CONFERENCE ATTENDANCE FORM

Please tick the appropriate box.

Participant

Name and Surname: _____

Attending (**please mark**):

- | | |
|-----------|---|
| 24.9.2018 | <input type="checkbox"/> Gala Dinner |
| 24.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |
| 25.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |

Accompanying person 1

Name and Surname: _____

Attending (**please mark**):

- | | |
|-----------|---|
| 24.9.2018 | <input type="checkbox"/> Gala Dinner |
| 24.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |
| 25.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |

Accompanying person 2

Name and Surname: _____

Attending (**please mark**):

- | | |
|-----------|---|
| 24.9.2018 | <input type="checkbox"/> Gala Dinner |
| 24.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |
| 25.9.2018 | <input type="checkbox"/> Lunch in Grand hotel Bernardin |