

UNESCO WORLD HERITAGE BETWEEN EDUCATION AND ECONOMY

A LEGAL ANALYSIS

Ravenna
27-28 OCTOBER 2016

Participation is free for students and academics but registration is required due to space constraints. Please, send an email to Dr Carla Rossi (Fondazione Flaminia) at the following email address: crossi@fondazioneflaminia.it

For other interested persons and professionals, a registration fee of Euros 100,00 has to be paid, following the indications of the registration form.

The Registration Fee has to be paid no later than Monday 24 October 2016, and communicated to Dr Carla Rossi by Monday 24 October 2016

REGISTRATION FORM

Please fill in this Registration Form in CAPITAL LETTERS and tick where appropriate. This registration form is for one participant only. Each participant should fill out a form (one form per person).

To register You must send both pages of this form by mail, together with a copy of money transfer, to the Congress Organizing Secretariat:

Carla Rossi

FONDAZIONE FLAMINIA, Via Baccarini 27 - 48121 Ravenna

E-mail: crossi@fondazioneflaminia.it

All personal data will be treated by University of Bologna according to Italian privacy data treatment law 675/1996.

I - PARTICIPANT'S DETAILS		
Family name:	First name:	
Title (Dr, Mr, Mrs, Ms, Prof, other): <i>Mr</i>		
Organization:		
Address:		
Zip Code:	City	Country
Tel:	Fax:	
E-mail*:		

REGISTRATION FORM

II REGISTRATION FEES		
<i>Tick where appropriate</i>		
Regular	€ 100	
TOTAL AMOUNT	€ _____.	

The registration fee includes:

- Attendance to all lectures · Lecture notes
- Lunches and coffee breaks.

The registration fees do not include:

Travel and lodging and dinners, insurance of participants against accidents, sickness, cancellation, theft, property loss or damage. Participants are advised to take out adequate personal insurance.

III- BANK TRANSFER AND BANK COORDINATES – Reason for payment < Unesco congress>	
<p>Bank transfer to: CAMPUS RA i, 27. 48121 Ravenna Partita iva : 01131710376</p>	<p>Bank coordinates: UNICREDIT BANCA IBAN: IT35B 02008 13120 000001483045 BIC SWIFT: UNCRITM1RM0</p>

REGISTRATION FORM

IV- BILLING DETAILS		
Clearly state if the invoice is to be issued under the name of the participant or of a Company/Institution, please fill in the following details:		
Individual	Company	Institution
Name:		
Address:		
Zip Code: 48121	City Ravenna	Country: Italy
Tel:		Fax:
Fiscal Code		
Email:		

V – CANCELLATION & REFUND

Cancellations and changes concerning your registration should be notified to the Congress Organizing Secretariat. Fees will NOT be refunded .

I hereby confirm that I have read and understood the registration terms as well as the cancellation and refund policy, which I accept without any reservations.

Date: _____

Signature: _____

(Please do not type your name. Original signature is required.)