

# Control'2012 Conference Registration Form

## July 16<sup>th</sup> to 18<sup>th</sup>, 2012, University of Madeira, Portugal

Name:	last	first	middle
Company or affiliation:			
Address:	street		
	city	zip code	country
Telephone:			Fax:
e-mail:			VAT number:
Paper number and title:			

Conference registration		Before May 15		After May 15	
Member of APCA	Full Fee	350 Euros	<input type="checkbox"/>	400 Euros	<input type="checkbox"/>
	Student Fee	150 Euros	<input type="checkbox"/>	200 Euros	<input type="checkbox"/>
Non-member of APCA	Full Fee	400 Euros	<input type="checkbox"/>	450 Euros	<input type="checkbox"/>
	Student Fee	200 Euros	<input type="checkbox"/>	250 Euros	<input type="checkbox"/>
Accompanying Person		150 Euros	<input type="checkbox"/>	200 Euros	<input type="checkbox"/>

HOTEL	DOUBLE	Extra Night	SINGLE	Extra Night	Options
Hotel CS Madeira 5*	530.00	53.00	720.00	95.00	
Hotel Enotel Lido 5*	492.00	49.50	652.00	88.00	
Hotel Four Views Baia 4*	424.00	32.50	538.00	58.00	
Hotel Orquidea 3*	379.00	22.50	433.00	36.00	

Package includes:

Total:

- 4 nights accommodation with breakfast in one of the chosen hotels; prices per person (euro) (options example: 1Pax, 15Jul to 19Jul):
- Flight Lisbon / Funchal / Lisbon with TAP (airport taxes are included and costs in this moment Euros 103,00 per person, but can change until the beginning of the trip) and transfers airport / hotel / airport;

Hotel only, prices per person and per night (euro) (options example: 1Pax, 15Jul to 19Jul):

HOTEL	DOUBLE	SINGLE	Options
Hotel CS Madeira 5*	53.00	95.00	
Hotel Enotel Lido 5*	49.50	88.00	
Hotel Four Views Baia 4*	32.50	58.00	
Hotel Orquidea 3*	22.50	36.00	
Total:			

Please, check above your option. Payment options: Bank Transfer or Credit Card. See information below.  
If select payment option is Credit Card please fill the corresponding table.

**Total Payment:** \_\_\_\_\_

Bank Draft:	Banco Espírito Santo
Bank Id Number (NIB):	0007024300467120001.34
Credit Card Holder Name:	as in the card
Credit Card Number:	16 numbers
Expiration Date:	month / year
Card Type:	visa/mastercard/amex
Security number:	3 last digits behind cc

We kindly ask you to fill and sign this bulletin and send it, with information regarding payment, to:

Intertours Travel Consulting  
Avenida Arriaga, 30 – 3º  
9001–901 Funchal - Portugal  
Cristina Sousa ([cristina.sousa@intertours.com.pt](mailto:cristina.sousa@intertours.com.pt))  
Telephone: (+351)291208906 Fax: (+351)291225020

Date & Signature

Organization



Sponsors

