

October 24th, 2013, Hotel Sheraton Sofia, Royal Hall

Registration Form

Delegate details:	
1. I	First name Last name
J	ob title
•	e-mail:
2. F	First name Last name
J	ob title
•	e-mail:
3. I	First name Last name
J	ob title
	e-mail:
	npany:
	dress:
_	z:
Tel.:	: Fax:
Wel	bsite:
Invo	pice details
Pric	ing details:
	(per delegate) BGN, VAT included AmCham members Non-members 90 120
The Ame	ment details: payment should be made in full no later than October 22nd, 2013 by a bank transfer to: erican Chamber of Commerce in Bulgaria BANK, N.ASofia, Swift: CITIBGSF, Account Number: IBAN:BG87CITI92501042000206 (BGN)
Pleas	v to register: se send the registration form before October 22 nd , 2013 in order to successfully register for the event. can register via: fax: +359 2 9742 741 or e-mail to: avelkova@amcham.bg
Cor	I/we confirm that I/we have read and accepted the Conference cancellation/substitution policy
Sig	nature: Date:
	ns & Cancellations/Substitutions egistration fees are inclusive of conference proceedings, delegate pack, business luncheon and coffee-breaks. The registration fee does no

- include hotel accommodation and travel costs.
- 2. Full payment must be received prior to the Conference date. Invoice will be issued on payment.
- 3. If you are unable to attend the events you may make substitution(s) prior notice. Cancellation must be received in written 3 days prior to the event. In case of NOT received cancellation in due time, full fee is payable.
- 4. It may be necessary for reasons beyond the control of the organizers to change the content and timing of the program, the speakers, the date of the location without notice or to postpone the conference. In such cases the organizers are not responsible for covering airfare, hotel, or other travel costs incurred by participants.
- 5. The Registration form constitutes a legally binding contract.
 6. For more details please contact the office of the American Chamber of Commerce in Bulgaria at +359 2 9742 743/4/5 or e-mail: avelkova@amcham.bg