

REGISTRATION & BOOKING FORM (please print)

Compulsory information for ferry booking

*To be shown on the badge

Male Female Date of birth (year/month/date): ____ / ____ / ____ Nationality: _____

First name*: _____ Last name*: _____

Professional title*: _____

Company*: _____ VAT number: _____

Nature of business*: _____

Address: _____

Postal code: _____ City: _____ Country: _____

Phone: _____ Mobile phone: _____

E-mail: _____

Invoicing address (if different from above)

First name: _____ Last name: _____

Company: _____ VAT number: _____

Nature of business: _____

Address: _____

Postal code: _____ City: _____ Country: _____

Phone: _____ Fax: _____

CONFERENCE FEES

**include (for each delegate): conference attendance; cabin (as chosen below) Stockholm-Helsinki and return; two breakfasts, two lunches, two dinners including beer, wine, water, dinner drinks, happy hour and night caps.

(Fixed prices in SEK. Rates of exchange may vary.)

	SEK	EUR	USD	
Single cabin/one delegate				
<input type="checkbox"/> Inside cabin**	14,550	1,440	1,530	Sold out!
<input type="checkbox"/> Inside cabin towards promenade deck**	15,100	1,495	1,600	Sold out!
<input type="checkbox"/> Outside cabin**	15,650	1,550	1,640	
<input type="checkbox"/> de Luxe outside**	21,550	2,140	2,260	
Double cabin/two delegates				
<input type="checkbox"/> Inside cabin**	24,750	2,460	2,600	Sold out!
<input type="checkbox"/> Inside cabin towards promenade deck**	25,650	2,540	2,700	Sold out!
<input type="checkbox"/> Outside cabin**	26,650	2,650	2,800	
<input type="checkbox"/> de Luxe outside**	36,650	3,640	3,860	

We want to share cabin: (Please note: delegates who share cabin must send in two separate registration forms)

Name 1: _____ Name 2: _____

Dietary or special requirements and food allergies - please let us know.

REGISTRATION / PAYMENT

All participants who wish to attend the conference must be registered. Please note that firm registration is only valid after your payment of the invoice. Participants are requested to return one registration form per participant to Shippax by fax or by mail, to the fax number and address listed below. Please keep a copy of the form, and your payment, for your records.

BOOKING CONFIRMATION

During February 2019, a formal letter of confirmation will be sent to you based on your registration form and payment. Please present this confirmation at the registration desk at the conference venue as proof of your registration.

CANCELLATIONS

Should you be unable to attend the conference, a substitute participant is always welcome at no extra charge if he/she carries a letter of authorisation from the original participant and if the conference office has been notified of the name of the substitute participant before the conference. If cancellation is made before February 10th, 2019, a fee of SEK 950 will be charged. If cancellation is made after February 10th, 2019, no refunds will be made, and full payment is required.

Date: _____ Signature: _____

Payment instructions will follow on the invoice. All payments need to be settled before the conference starts. Please note, the number of delegates will be limited.