

REGISTRATION FORM

Cerebral Palsy Association of Coimbra

Personal Data

Name: _____

Date of Birth: ____ / ____ / ____

Identification Document: _____

Number of Identification Document: _____ Expires: _____

Nationality: _____

Address: _____

Zip Code: _____ - _____

Region/Country: _____

Contact 1: _____

Contact 2: _____

Email: _____

Level of Qualification: _____

Professional data

Employer: _____

Professional Sector: _____

Function: _____

Course you want to attend:

Date: ____ / ____ / ____

ORGANIZATION DETAILS:

Maximum number of participants envisaged: 20 participants (including 6 nights' accommodation (APA), 5 lunches and 4 dinners. Reception and farewell dinners are not included).

Fee for accommodation and meals (if chosen): €500

Course fee: €450

Cancellation fee (where applicable): €250

Cancellation rules: Candidates who cancel the course up to 4 weeks before the starting date get a full reimbursement of the deposit paid. For later cancellations a 250 Euro penalty will apply. The organizers can cancel the course if minimum number of candidates is not registered. In that case, the whole amount paid is fully reimbursed.

Provision for special needs: Yes

Details of special needs provision (if present): No limits to the access on mobility of disabled people.

Special remarks: Do not book flight tickets before the official confirmation of the beginning of the course.