**AGILE@PROCUREMENT**

ONE-DAY WORKSHOP

Wednesday, 23rd of May 2018

EIPM Archamps Campus, FRANCE

REGISTRATION FORM

Please print this form (one per participant) and email it to [scodeville@eipm.org](mailto:scodeville@eipm.org) or fax it to Ms. Silmara Codeville at +33 (0) 4 50 31 56 80

Ms. Mr.

|  |  |
| --- | --- |
| Family Name: | |
|  | |
| First Name: | |
|  | |
| Job Title: | |
|  | |
| Company: | |
|  | |
| Address: | |
|  | |
| Zip Code: | City: |
|  | |
| Country: | |
|  | |
| Tel: | Fax: |
|  | |
| E-mail: | |

|  |  |  |
| --- | --- | --- |
| **FEES** (Including lunch, coffee breaks and documentation) | | **Date & Signature:** |
| **EIPM Club Members** | **FREE** |
| Special fee (for payment by credit card by April 22nd, 2018) | **750 € + VAT** |
| Normal fee | **850 € + VAT** |

I need special meals arrangements (please specify below):

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PAYMENT TERMS

**COMPULSORY**

**Purchase Order N°:**     ……………………………………………………………………

**Your company VAT N°:**     ………………………………………………………………………………….

**Invoicing dept contact and Tel N°:**      ………………………………………………………………….

**Invoicing address: (If different from participant’s one)**      **……………………………………………………………………………………………………………….**

**PAYMENT CAN BE MADE BY:** (please tick)

**Credit Card** (Diners card not accepted)      

**Cheque payable to**: EIPM – Bât Mont Blanc II – Rue Antoine Redier – 74160 Archamps – France

**Bank transfer in Euros payable to**:

SARL EUROPEAN INSTITUTE OF PURCHASING MANAGEMENT

Bank: Crédit Agricole des Savoie – 2, Place de la Libération BP 95 – 74160 St Julien en Genevois – France

Bank Code: 8106 - Sort Code: 00034 - Account n°: 341 626 74 050 - Key: 08

Swift Code: AGRI FR PP 881 - IBAN: FR76 1810 6000 3434 1626 7405 008

European VAT Number: FR 913 930 946 28

**IMPORTANT: Please specify Invoice Number on transfer**.

|  |  |
| --- | --- |
| **Cardholder’s name:** | **Cardholder’s Signature:** |
| **Number:** |
| **Expiry date:** |
| **Security code (last 3 digits on the back):** |

## CANCELLATION POLICY

All cancellations are to be made in writing. You may change the name of the participant at any time.

BD15059_ For cancellations received by April 22nd, 2018, 50% of the amount due will be charged.

BD15059_ For any cancellations received from April 23rd, 2018, 100% of the amount will be charged.

***Please note that NO REFUND will be made for cancellations due to problems with Airline or Train companies!***

Please note that we’ll be taking pictures during the event and a photo of you might be used on our website and/or printed promotional material. Please email scodeville@eipm.org if you do not want us to use it for such purposes.

**I have taken note and accept the conditions (please tick).**