

**Topic:** “Workshop on EU Funding – Project Management”

**Duration:** 2 days, 7 hours

**Date:** 15/11/2017 and 16/11/2017, from 9:00 AM to 12:30 PM

**Venue:** Official Spanish Chamber of Commerce in Belgium and Luxembourg- Rue Belliard 20-1040 Brussels

**Participant’s information**

Last Name		
Name		
Company		
Position		
Address		
Postal Code / City / Country		
VAT Number		
Telephone		
E-mail / Web		
Member of the Chamber	YES	NO

**Would like to take part in this course:**  
 Alone / Accompanied by

Name-Last Name	Company	Position	E-mail

Price per participant (VAT not included)	Member*	Non Member
	120	150

**\*Those accompanying a member of the Chamber will benefit from the ‘member’s fare’ when being their guests.**

- **I will pay the amount of** .....€ by bank transfer to the Chamber’s account number **BE 20642000102556 – BIC: BBVABEBB**, indicating the topic of the event, the name of the company and number of participants. The Chamber will send me the related invoice. Any registration may be cancelled by writing up to 72 hours prior to the event. After this date payment is due. On previous information, other participants may replace registered persons.

- I accept that this service is submitted to the general sale conditions of the Chamber.

- I wish to receive an invoice: YES NO

**Invoicing address (if different from the above):**

In ..... date ..... signature(s)

**To be sent to:**

**Ms González Benguria**

**Official Spanish Chamber of Commerce in Belgium and Luxembourg, asbl-vzw**

Belliard 20, 1040 Brussels / 4, Bld. Emmanuel Servais, 2535 Luxembourg

Tel. +32 (0)2 517 17 40

info@e-camara.com