REGISTRATION FORM

International Association of Operative Millers (IAOM)



MARRIOTT BOULEVARD HOTEL, BAKU, AZERBAIJAN 24 September – 27 September, 2024

ACCOMMODATION AND REGISTRATION ADVANTAGE PACKAGES

ACCOMODATION AND REGISTRATION PACKAGE (Marriott Boulevard Hotel)	EARLY REGISTRATION PAYMENT FEE (Until 1 August 2024)	LATE REGISTRATION PAYMENT FEE (After 1 August 2024)
SUPPLIERS/ SPONSORS	□ 900 EURO + VAT	□ 950 EURO + VAT
MILLERS REGISTRATION	□ 750 EURO + VAT	□ 800 EURO + VAT

REGISTRATION -TERMS AND CONDITIONS FOR MILLERS

REGISTRATION TYPE	EARLY REGISTRATION PAYMENT FEE (Until 1 August 2024)	LATE REGISTRATION PAYMENT FEE (After 1 August 2024)
SUPPLIERS/ SPONSORS	□ 500 EURO + VAT	□ 550 EURO + VAT
MILLERS REGISTRATION	□ 350 EURO + VAT	□ 450 EURO + VAT

Simultaneous Translation English - Russian - Turkish

- •Lunch, coffee breaks and dinners •Conference Brochures
- •Access to Forum papers and presentations
- No refunds after registration with payment •Registration rates are excluded 20% VAT

ACCOMMODATION	SINGLE	DOUBLE
MARRIOTT BOULEVARD OTEL	□ 400 EURO	□ 450 EURO

Accommodation fees include 2% accommodation tax, VAT is not included. VAT rate is 10%.
Room rates are for 3 night. 24 September check-in and 27 September check-out.

• Before making room reservation and payment, we kindly ask you to get availability information. info@iaom-eurasia.info

• The above prices may vary depending on the available room types and number of stays in the hotels, together with the availability information.

Please send form to below address;

İçerenköy Mh. Umut Sk. AND Plaza No: 10-12 Kat:18 Kozyatağı, Ataşehir – İSTANBUL, TURKEY **Tel:** +90 216 594 58 26 **E-mail: info@iaom-eurasia.info**

Name-Surname :		
Company Name :		
Address :		
City/Country :		
Phone :	Fax :	
E-mail :		
Invoice Address :		

BANK TRANSFER	
BANK / BRANCH	T.GARANTİ BANKASI AŞ/ ANKARA TİCARİ ŞB.
ACCOUNT NAME	SERENAS ULUSLARARASI TURİZM KONGRE
	ORGANİZASYON A.Ş.
SWIFT CODE	TGBATRISXXX
EURO	TR67 0006 2000 1700 0009 0914 45
TL IBAN	TR50 0006 2000 1700 0006 2906 82

CREDIT CARD			
CARD TYPE		D	
CARD HOLDER's NAME			
CARD NUMBER			
EXP DATE		CVC	

I hereby authorize SERENAS Tourism (Serenas Uluslararası Turizm Kongre Org. A.S.) to have my credit card charged for the amount which has the details on the form.

DATE	
SIGNATURE	