

## **Eighth International Chrysophyte Symposium**

## Prague, Czech Republic 12. - 17. August 2012

## **Registration Form**

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Affiliation  Mailing Address  City, State, Zip Code			
Phono No			
VAT (for EU participants only)			
Conference Registration Fees (selected options)	(Please tick the b	oxes below to indicate the	е
Registration Fee (Standard regist the Symposium, conference		,	ssion to
• Regular:		190,- EUR □	
Student:		125,- EUR □	
Evening Dinners			
Welcome Party (Monday 13 August):		25,- EUR □	
Farewell Party (Friday 17 August):		50,- EUR □	
Mid Symposium Evousions	,		
<ul><li>Mid-Symposium Excursions</li><li>Adolf Pascher's legacy (Doksy region):</li></ul>		50,- EUR □	
<ul> <li>Prague – historical city:</li> </ul>		60,- EUR □	
r rague - metericar etty:		00, <b>20</b> 10 =	
<b>Lodging -</b> Petrská dormitory (For For booking double rooms, please spec with a friend, or wish to have a roomma availability):	ify whether you will b te arranged for you b	e attending as a couple, sharir	ng a room
7/		Double room	
<ul> <li>Sunday 12 August</li> </ul>		15,- EUR □	
<ul> <li>Monday 13 August</li> </ul>	20,- EUR □		
<ul> <li>Tuesday 14 August</li> </ul>	20,- EUR □	·	
<ul> <li>Wednesday 15 August</li> </ul>		15,- EUR □	
Thursday 16 August		15,- EUR □	
<ul> <li>Friday 17 August</li> </ul>	20,- EUR □	15,- EUR □	
Please sum your total costs an	d enter here:	EUR	
<b>-</b>			

## Payment method (Please tick the appropriate box below) ☐ **Bank Transfer -** Please send the money to our account with the following data. Bank Name: Komercni banka, a.s. Bank Address: Vaclavske namesti 42, Prague 1, Czech Republic Account no.: 34956-921457021 IBAN: CZ25 0100 0349 5609 2145 7021 SWIFT: **KOMBCZPP** Account Name: Prirodovedecka fakulta UK Please indicate your name and the conference ID: 90911704! ☐ Credit Card Payment (VISA and MASTERCARD only) Please provide the following information: ☐ VISA ☐ MASTERCARD Card Type: Name on card: ..... Card Number: Expiration Date: \_\_/\_\_ Security Code: \_ \_ \_ **Registration Form Submission** Please submit your registration form using one of the following methods: Mail to: Pavel Skaloud, Department of Botany, Charles University in Prague, Benatska 2, 128 01, Praha 2, Czech Republic **FAX** to: +420-221-951-645, Attention to Pavel Skaloud E-mail as attachment to skaloud@natur.cuni.cz Contact If you have any questions, please contact us: E-mail: skaloud@natur.cuni.cz, ynemcova@natur.cuni.cz Tel.: +420-221-951-648 (Pavel Skaloud) +420-221-951-647 (Yvonne Nemcova)