

# 2<sup>ND</sup> ALM AND LIQUIDITY RISK CONFERENCE

APRIL 16<sup>th</sup>-17<sup>th</sup>, 2018, RADISSON BLU SOBIESKI WARSAW

## COMPANY DETAILS:

Company name.....  
Postal address.....  
Contact person.....  
Department.....  
Telephone number.....  
E-mail address.....  
Billing information.....

## DELEGATES:

Name.....  
Surname.....  
Job title.....  
Department.....  
Telephone number.....  
E-mail address.....  
Name.....  
Surname.....  
Job title.....  
Department.....  
Telephone number.....  
E-mail address.....

## PAYMENT (Invoice details):

Full name of the company.....  
Address.....  
Vat.....

According to art. 24 section 1 of the Act of August 29, 1997 on the Protection of Personal Data (Journal of Laws of 2016, item 922) I inform you that the administrator of personal data is Prestige Conferences Sp. z o.o. with headquarters at ul. Dembego 30/5, 02-796 Warsaw. Personal data included in this form are processed in order to enable us in the future contact with you in connection with our training offer.

We would like to inform you that you have the right to access to your data and correct them and you have right for written request to stop processing data. Providing personal information is voluntary.

I agree / do not agree \* to the processing of my personal data by the Data Administrator personal data in order to provide me with marketing information regarding training and conferences in the future. I am aware that I can revoke my consent at any time by contacting the administrator personal data.

I agree / do not agree \* to receive from Prestige Conferences Sp. z o.o. electronically on the e-mail address provided by me in the Form, regarding the training and conferences offered by Prestige Conferences Sp. z o.o. within the meaning of the Act on the provision of electronic services dated July 18, 2002 (Journal of Laws of 2013, item 1422, as amended).

\* please delete as appropriate

Legible signature.....

Stamp and signatura

## Please fill out the form and send it to:

e-mail: [info@prestigeconferences.pl](mailto:info@prestigeconferences.pl)

Tel.: +48 22 641 14 30

+48 22 648 89 56

Fax: +48 22 649 12 49

## CONFERENCE FEES/ 1 PARTICIPANT

Standard: **560 EUR**+ vat after 2<sup>nd</sup> of March 2018 - until 21<sup>st</sup> of March 2018

Late : **600 EUR** +vat after 21<sup>st</sup> of March 201

Date of payment:

Payment within 7 days from the date of receipt of the invoice

## BANK TRANSFER DETAILS:

**Prestige Conferences Sp. z o.o.**

ul. Dembego 30/5

02-796 Warsaw

Tax ID: 951 236 29 98

KRS: 0000446692

REGON: 146488132

Bank account number:

22 1090 2835 0000 0001 2045 0554

## TERMS AND CONDITIONS

1. The payment should be made before the conference
2. The fee includes participation in the conference: the merits, conference materials, coffee breaks and lunch.
3. After receiving the completed form, confirmation of participation, the pro-forma invoice will be sent to you
4. Cancellation policy: you may cancel your registration by fax or e-mail. If you cancel more than 14 days before the training / conference you will be charged administrative fee in the amount of PLN 900 + VAT.
5. In the event of cancellation within less than 14 days before the training / conference will be charged with full participation costs
6. You have the option of changing the person to a registered place
7. The organizer reserves the right to change the program or cancellation of training / conference for unforeseen reasons
8. In the case of the event cancellation, the costs will be refunded to you