

REGISTRATION FORM
Mabel Katz - Business Seminar
Bucharest 16th of march 2010 – Caro Hotel – Eminescu Ballroom

Registration mode:

Please fill in this form using capital letters and send it till the latest **12th of march 2010** through:

E-Mail using the address: iulian@hooponopono.ro

Fax using the number: (+4) 0318.10.50.30

SC BIZ CONSULTANT SRL

Identification number RO 17769565

Registry of Commerce number: J23/1331/2005

Managing Partner: Iulian Motea – iulian@hooponopono.ro

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Contact person:

Iulian Motea

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● **PARTICIPATION FEE:**

588 RON (144 Euro)

15 % discount for more than 3 participants from the same company

The payment will be made in S.C. BIZ Consultant SRL's account opened in the **Romanian Commercial Bank**, Branch Unirea account: .
RO24 RNCB 0082 0441 7312 0001 (RON)
RO67 RNCB 0082 0441 7312 0003 (EURO)

The invoice will be issued after the collection of the participation fee and will be handed in the day of the seminar.

Paying of the fee assures the following services:

- Participation to all the parts of the seminar (sessions, exercises, coffee breaks)
- Simultaneous translation: english/ romanian

Note:

- *The copy of the payment order will be sent together with the registration form.*

1. Fill in one exemplar for each participant

2. The advance cannot be sent back or transmitted for another person. If you do not participate, the fee will be carried forward to the next edition of the seminar (this will be organized not later than 6 months)

3. Biz Consultant SRL can cancel the event if it will be forced by circumstances. In this case all the participation fees will be sent back.

4. The present form is also an **order – contract**.

The price includes VAT.

PARTICIPANT'S REGISTRATION

Please register me

Natural person

Name Mr/Mrs _____

Forename _____

ID no _____

Address _____

Phone _____

E-mail _____

Legal person

Delegate's name _____

Delegate's forename _____

Name of the company _____

Identification number _____

Registry of Commerce number _____

Address _____

Account no _____

Bank _____

Phone: _____ Fax: _____

E-mail _____

Signature and stamp:

PARTICIPANT

Date :

Signature and stamp:

SC Biz Consultant SRL

Iulian Motea