

Registration Card

(valid in combination with our confirmation of participation in written form)



To
International Haus Sonnenberg
Sonnenberg-Kreis e.V.
Clausthaler Str. 11
D-37444 St. Andreasberg / Oberharz

Conference topic: _____

Conference no.: _____
Conference date: _____

Tel. ++49(0)5582-944-0 • Fax. ++49(0)5582-944-100 • e-mail: info@sonnenberg-international.de • www.sonnenberg-international.de

Surname/First name: _____

Address: _____

Phone: _____
(home) (office)

E-Mail: _____ Fax: _____

Occupation: _____

Nationality: _____ Date of birth: _____

Please arrange:

- | | | |
|---|------------------------------|-----------------------------|
| <input type="checkbox"/> a seat in the special bus (from Bad Harzburg on the day of arrival, please take time out of the conference program) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> a single room (surcharge € 10 per night /€ 5 for members) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> a disabled accesssible room | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> a special diet: _____ | | |
| <input type="checkbox"/> Information on this conference | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> the Sonnenberg-Programm | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Other wishes: _____

For participants from foreign countries, special regulations are valid for the payment of the conference fees. Further information on request.



Date

Signature of participant

Please take a look at our website www.sonnenberg-international.de for up-to-date information