

Appendix 1

APPLICATION FORM TO ATTEND THE CONGRESS COLLECTORS AND FRIENDS OF EXLIBRIS
GRAPHIC SYMPOSIUM ČESKÝ KRUMLOV 2019

APPLICANT – CUSTOMER (FILL IN BLOCK LETTERS)

FIRST NAME:SURNAME:DEGREE:

ADDRESS

STREET:CITY/TOWN:ZIP CODE:

COUNTRY:

E-MAIL ADDRESS:PHONE NUMBER:

ACCOMPANYING PERSON

FIRST NAME:SURNAME:DEGREE:

FIRST NAME:SURNAME:DEGREE:

I will participate in Saturday's social evening with a dinner YES NO *

With accompanying person YES NO *

Total number of people:

Total number of dinners:

I am interested in a parking place. ANO NE *

I paid the congress fee of.....CZK/euros by bank account transfer on.....(DD/MM/YY).

For example:

54 euros (one person), 20 euros (accompanying person), 16 euros (2x dinner) = 106 euros

We also ask you to complete the GDPR (General Data Protection Regulation), consent in Appendix 2. Without your consent, we cannot process your personal information and your application will be invalid. Thank you for your understanding.

In.....Date.....

.....
Customer signature

*) MARK WITH A CROSS

*) The order is obligatory, the payment will not be refunded.

