# BIAC DEVELOPMENT TASK FORCE

6 November 2014 - Paris

**Registration Form**

Please confirm your participation for each event and return this completed form to:
BIAC Secretariat, E-mail: dosreis@biac.org , Fax: 33 1 42 88 78 38

**I plan to attend** **YES NO**

# 6 November (10:00 to 16:30)

BIAC Development Task Force Meeting [ ] [ ]

**Venue: BIAC Offices – 13/15 Chaussée de la Muette – 75016 Paris**

# 6 November (13:00 – 14:00)

Subscription lunch discussion (box luncheon) [ ] [ ]

**Venue: BIAC Offices – 13-15 Chaussée de la Muette – 75016 Paris**

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**Payment Details for the Subscription Lunch**

Please indicate if you have any specific dietary preferences: ………………………………

[ ] *Visa* [ ] *Eurocard/Master Card* [ ] *American Express*

 *Card Number ……………………………. Expiry date …………….*

***For Visa Card, please indicate the Visual Cryptogram (3 last numbers at the back of your Visa Card): ………………***

*I am hereby providing my credit card information for the subscription lunch (menu at approximately* ***35 €****), and I am aware that my credit card may be debited in the case where I cancel my participation with less than 48 hours notice.*

***Name of card holder ……………………………. Signature …………………………….***

**Contact Details**

**Name, title, Company/Organisation, business address, telephone number and e-mail address:**

**Please indicate, if known, the name and telephone number of your hotel in Paris:**