

PAYMENT GUIDE FSAM 2010

Payment in 3 steps:

- 1) **Download and print this file**
- 2) Please, **make the payment** according to the following information or provide them to your accountant.
- 3) **Fill this form** and **fax** it to: **+420 385 310 248**, or **mail** to Katka Soukalova, Na Sadkach 7, Ceske Budejovice 370 05, Czech Republic, so we can identify your payment.

In all instances you are **required** to fill and submit the exhibitor **registration** form.

*The payment **must be received in full** by the recipient. Please, be aware that missing amounts due to bank charges will be invoiced directly at the conference registration.*

Thank you.

Payment of exhibitor fee is available via BANK TRANSFER:

Beneficiary customer: **Biologicke centrum AV CR, v.v.i.**
Name of account/bank: **Ceska narodni banka**
Address of bank: **Lanova 1, Ceske Budejovice, 371 35 Czech Republic**
Account Number: **5527231/0710 CZK**
IBAN: **CZ 22 0710 0000 0000 0552 7231**
SWIFT (BIC): **CNBACZPP**
Payment Identification Number: **7140**
Type of bank fees indicate as: **OUR**

From:

Name of Organisation:

Account No.:

I hereby confirm that the above indicated payment has been processed:

Name of responsible person:

Position

Signature..... Date:.....

Confirmation of your payment will be sent via fax or e-mail.

Refund / Cancellation Policy: Full refund made less of €100.00 administration fee will be provided if written notification of cancellation is received before 27 July 2010. After 27 July 2010 no refunds will be made. Substitutes are welcome.