

## 9th International Granulation Workshop 26-28 June 2019, Lausanne

## Personal Information (please write in CAPITAL LETTERS)

□ Mrs	□ Mr
First name:	
Last name:	
Company:	
Job title:	
Email:	
Address:	
City:	ZIP Code:Country:
Registra	tion fees
□ Regular p	articipant (CHF 900)
☐ Student (	CHF 800) *
	e: If you wish to register as a student, please send a copy of a valid student card to plausanne-tourisme.ch
on a waitin  ☐ CGN Cruis  ☐ Gala dinne	that all the social events are full. Please mention here if you would like to <b>put your name</b> ag list for the following events. We will let you know if a place is still available:  se + Chillon Dinner - 26.06.19 (CHF 10)  er - Royal Savoy - 27.06.19 (CHF 10)  eum - 28.06.19 (CHF 10)
PAYMEN	
Total : CHF	
☐ I would lik	ke to pay by credit card in advance (saves time on-site). No refund upon cancellation.
Please co	mmunicate your credit card number by phone to Angélique Crettenand: +41 21 613 73 16
$\square$ I will pay	on-site. Kindly take note that on-site registration will take approx. 15 minutes
Payme	ent by   ☐ Credit card (VISA, ECA, AMEX, MasterCard)  ☐ Cash (only in CHF)
Registration Cancellation Policy: no fee will be refunded.	
Date	Signature