CENTRE NATIONAL D'ETUDES SPATIALES

SPACE TECHNOLOGY COURSE

Spacecraft Techniques and Technology

30 May-3 June and 6-10 June 2005
Diagora, Labège - Toulouse (France)

Please return to
Monsieur le Régisseur des colloques du CNES,
CNES - Bâtiment Fontenelle
18, avenue Edouard Belin
31401 TOULOUSE CEDEX 9 - FRANCE
Fax: (33) 05 61 28 33 15

-> Before 15 May 2005
No reimbursement for cancellation after 20 May 2005

REGISTRATION FORM TTVS2005

❒ Mr ❒ Mrs ❒ Ms

SURNAME	FIRST NAME(S)
COMPANY	JOB TITLE
IDENTIFICATION VAT NUMBER	**DO YOU HAVE A TRAINING AGREEMENT?** ❒ Yes ❒ No
ADDRESS	BILLING ADDRESS (IF DIFFERENT) (1)
ZIP CODE CITY	
COUNTRY	
PHONE NO.	NAME, ADDRESS AND CONTACT INFORMATION FOR SIGNATORY OF THE EMPLOYMENT TRAINING AGREEMENT (1)
FAX NO.	
E-MAIL	

(1) For the following cases: either the invoice is to be paid directly by the training fund organisation to which your company subscribes or it is to be sent to a different address to that shown in the 'COMPANY' box .

Registration Fees

❒ **Normal fees: 2500 € VAT included (2090.30 € amount excl. VAT, % VAT 19,6)**
❒ **Student: 900 € VAT included (752.51 € amount excl. VAT, % VAT 19,6)**

❒ I hereby enclose a non-endorsable cheque drawn on a French bank of ..... € made out to *M. le Régisseur des colloques du CNES*

❒ I have paid by bank transfer the amount of ..... € (bank fees at my expense, copy enclosed) to:
Monsieur le Régisseur des colloques du CNES
Société Générale - Toulouse Labège - France – IBAN FR76 30003 02110 00037266596 05 - Bic Adresse SWIFT: SOGEFRPP
NB: When transferring fees please indicate the name(s) of the person (people) concerned (or invoice references)

❒ My company is sending an order form to *M. le Régisseur des colloques du CNES* for a total amount of.....€
Kindly send us the corresponding invoice.

❒ I hereby authorize *M. le Régisseur des colloques du CNES* to charge my credit card (VISA, Eurocard, Mastercard only) for a total amount of..... €

Credit card number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry date: ☐☐/☐☐ Signature: .....