



4th ADERSE Conference

October 26-27th, 2006



Registration Form

Please complete and return before October 16th to:

Corinne AFFAGARD
BORDEAUX ÉCOLE DE MANAGEMENT
Domaine de Raba
680 Cours de La Libération
33405 TALENCE CEDEX
FRANCE

FAX: + 33 [0]5 56 84 55 50 - corinne.affagard@bordeaux-bs.edu

Ms Mr. Dr. Prof.

Surname: _____ First name: _____

Job title: _____

Institution: _____

Address: _____

Town/City: _____ Postal code: _____

Country: _____

Tel: _____ Mobile: _____ Fax: _____

E-mail: _____

Conference fee:

- Member of ADERSE, AGRH, ANDCP, IAS, ISBEE, RAC or SBE: **250 euros**
- Non-Members of the above-mentioned networks: **300 euros**
- Student / job seekers: **100 euros**

PLEASE NOTE: FULL PAYMENT OF THE CONFERENCE FEE MUST BE RECEIVED WITH THIS REGISTRATION FORM

I enclose a cheque made payable to 'Bordeaux Ecole de Management' for Euros _____

Please debit my Credit Card: Visa Mastercard Amex

Number _____ Expiry Date _____

Name on Card _____ Amount in Euros _____

Signature _____