



REGISTRATION FORM

1st World Conference "FROM THE ART TO THE TECHNOLOGY OF CHANGE"

CHIANCIANO TERME, SIENA - 10-14 NOVEMBER 2010

to send via fax to N. +39.0575.350 277 via mail to secretary@bsst.org

or send to "S.T.C. Change Strategies" Piazza S. Agostino, 11- 52100, Arezzo, Italia - Phone + 39 0575 350240 www.bsst.org

INDICATE BELOW WHICH OF THE EVENTS YOU WOULD LIKE TO PARTICIPATE:

(you can put a cross on more than one option)

PRECONGRESS WORKSHOP
[10th November 2010]

with G. Nardone & M. Selekman

FULL CONFERENCE
[11th-12th-13th-14th November '10]

1 DAY OF CONFERENCE

- 11th November 2010
- 12th November 2010
- 13th November 2010
- 14th November 2010

Dinner "On the road of taste"
€ 35,00 MERC. 10th November

Dinner "At Bacco's Court"
€ 35,00 GIOV. 11th November

Dinner "Problem vs Solution"
€ 40,00 VEN 12th November

Gala Dinner
€ 80,00 SAB 13th November

REGISTRATION GENERAL CONDITIONS

1) It is obligatory to fill in the entire registration form which needs to be send to Strategic Therapy Center srl, together with payment slip/receipt. The registration fee allows you to attend the conference, to have a conference bag and the attendance certificate.

The participants are not allowed to audio-videotape, without presenting a written authorization request.

2) Cancellation and reimbursement. Cancellation is possible until 30 days prior to the beginning of the event, by sending a formal written request. In such case, the participant will pay 10% of the fee for organizing expenses. After this date cancellation will not be accepted.

3) Processing of personal data, abiding to law D.Lgl. 30.06.2003 n° 196. Your personal data will be processed by computerized procedure and used exclusively for activities permitted by the state law.

4) The information will be stored in our database, which will be disclosed only to S.T.C. partner exclusively for promotional-advertising activities.

Maria Cristina Nardone is the person in charge of the processing of personal data, by abiding to the privacy policy

PLEASE FILL ENTIRE FORM IN BLOCK LETTERS, ONE FOR EACH PARTICIPANT

PERSONAL DATA

Status Prof. Dr. Mr. Mrs. Ms.

Surname.....Name.....

Place and date of

birth:.....Address:.....

City.....Postal Code.....

State.....

Phone.....Mobile

Phone.....Email:.....

VAT no/tax Registration No

OBLIGATORY

Profession.....

Organization/institute*.....

Student N.:..... (please attach a copy of university identification card)

***N.B.** Please indicate the organisation or institute which you belong to. If you have the right for specific discounts please indicate the category (example student, affiliated clinic, etc) or the number of the accorded convention.

I GOT TO KNOW ABOUT THIS EVENT FROM: Congress brochure [] BSST Network website [] Email CTS newsletter []
Other Internet website [] Forum online [] Colleagues [] Press Release [] Other

INVOICE DATA

Registered to

VAT no/tax Registration No

OBLIGATORY

Address.....City.....Postal

Code.....

State.....Phone.....Fax.....

E.mail.....

Fees Tax Included		Till 31 th July '10	Till 31 th October '10	From 1 st November and during the Conference
Individual Registration	Precongress Workshop	€ 150,00	€ 180,00	€ 220,00
	Full Conference	€ 400,00	€ 550,00	€ 600,00
	1 day	€ 120,00	€ 150,00	€ 180,00
B.S.S.T. Network Member	Precongress Workshop	€ 120,00	€ 150,00	€ 200,00
	Full Conference	€ 300,00	€ 380,00	€ 500,00
	1 day	€ 100,00	€ 120,00	€ 150,00
	Precongress Workshop	€ 120,00	€ 150,00	€ 200,00

norms. If you are not interested in receiving further information, please put a cross here [].
 Audio-VideoTaping: S.T.C. srl will videotape the entire Conference. If you do not want to be recorded, please put a cross here [].

C.T.S. Affiliated	Full Conference	€ 280,00	€ 350,00	€ 450,00
	1 day	€ 100,00	€ 120,00	€ 150,00
S.T.C. Student	Precongress Workshop	€ 120,00	€ 150,00	€ 200,00
	Full Conference	€ 250,00	€ 300,00	€ 350,00
	1 day	€ 100,00	€ 120,00	€ 150,00
University Student and School of	Precongress Workshop	€ 120,00	€ 150,00	€ 200,00
	Full Conference	€ 200,00	€ 250,00	€ 280,00
Specializzazion Student	1 day	€ 50,00	€ 80,00	€ 100,00

* N.B. Colleagues coming from economically disadvantaged countries can ask to accord for special reductions. In such cases, colleagues should not hesitate to contact the Organisation secretary.

PARTECIPATION CONFIRMATION

ATTACH PAYMENT RECEIPT € Please sign below so as to confirm that you abide to the criteria 1, 2, 3, 4, 5 (art. 1341 C.C. II Comma)

Date Signature

PAYMENT DATA

- **Non transferable Bank Chequ** should be made to **STRATEGIC THERAPY CENTER SRL**

nr.....

Bank.....of

€.....

- **Bank Transfert** to STRATEGIC THERAPY CENTER,

Banca **MONTE DEI PASCHI DI SIENA** filiale di **Arezzo**, via Roma, 31

IBAN IT 96 P 01030 14106 00000820337 SWIFT **PASCITMIK66**

(in the description: indicate BSST 2010 + participant name)