2nd World Congress of ClinicalNeuroMusicology
December 2 – 3, 2011, Hotel Sacher Vienna, Austria

REGISTRATION FORM

Please use block letters and return this form by mail or fax at your earliest convenience:

Vienna Medical Academy
Fax: ++43 1 407 82 74
Mail: neuromusicology2011@medacad.org

Last Name: First Name: Title:

Institution:

Street:

ZIP Code: City: Country:

Phone:/ Fax: E-mail:

REGISTRATION FEE:	until Nov. 21*			onsite		
Conference only (Dec. 2)						
MD	○ EUR	105.-		○ EUR	130.-	
Therapists, Trainees, Students **	○ EUR	50.-		○ EUR	70.-	
Neurologic Music Therapy Workshops only (Dec. 3)						
MD	○ EUR	170.-		○ EUR	190.-	
Therapists, Trainees, Students **	○ EUR	120.-		○ EUR	140.-	
Conference & Neurologic Music Therapy Workshops (Dec. 2 & 3)						
	○ EUR	255.-		○ EUR	280.-	
	○ EUR	150.-		○ EUR	170.-	

* Please note that the stated rates are only valid as upon **receipt of payment within the given dates!**

** Please provide a copy of a confirmation together with your registration.

PAYMENT MODALITIES:

○ Bank Transfer (free of charge for the beneficiary):
"WMA c/o CNM", Account Number: 295-331-080-10
at the Erste Bank, Bank Code: 20111, BIC: GIBAATWW
IBAN: AT AT792011129533108010– to avoid bank charges, please use the IBAN within the EU

○ Credit Card:

○ VISA ○ Euro/MasterCard

Card Number: | | | | | | | | | | | | | | | | |

Expiry Date / Cardholder: _____

Date: _____ Signature: _____