**CREDIT CARD AUTHORIZATION FORM**

**Please complete &** **return by email to:** **istar@istarviaggi.it**

**APPLIED CONDITIONS**

The cardholder completing and signing this form authorizes ISTAR Viaggi & Turismo Sas on behalf of **EMSEV 2018 Workshop** to debit his/her credit card for registering to EMSEV2018 Workshop. This signed form must be emailed to: istar@istarviaggi.it

**EMSEV 2018 PARTICIPANT DETAILS:**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Surname**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please indicate*: **Senior participant** (250€) [ ]  or **Student or Young researcher** (100€) [ ]

With accompanying **person** **number**  [ ]  (please add 100€ per each one)

**CREDIT CARD DETAILS**

*We regret we are unable to accept AMERICAN EXPRESS or DINERS CARD for this form of payment*

*(Cardholder's full name)*

hereby authorize ISTAR Viaggi & Turismo Sas on behalf of **EMSEV 2018 Workshop** for the amount of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ € straight payment as if I had been present with my card.

**VISA  MASTERCARD **

Credit Card Number:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Last 3 digits on back of card**: \_ \_ \_ **Expiry date**: Month \_ \_ / Year \_ \_ \_ \_

**Cardholder's ID / Passport Number** **Country of Issue:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cardholder's Address:** .................................................................................................................................................

............................................................................................. **Postal Code:** ..........................................

**Cardholder's Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (essential)

**PRIVACY:** **All the above information will be treated exclusively for the EMSEV 2018 Workshop organization**

**REFUNDS: Refund will be possible in case of renounce to the participation communicated before August 31st 2018 by bank transfer corresponding to the full payed amount subtracted by the bank transfer costs**