

I CONFERENCE OF THE EUROPEAN PHILOSOPHY OF SCIENCE ASSOCIATION

November, 14-17 2007

Registration Form for Speakers at the Conference

Kindly fill in this form with capital letters and send it to the following address: Technical Secretariat. C/ Princesa, $47-6^{\circ}$, 28008 Madrid. Fax: 91 559 44 43 E-mail: grupossectorpublico@viajeseci.es Contacts: Patricia González

| Name | First name _ | | | | | |
|---|--|---|-------------------------|--------------------|----------------------|--|
| | | | | | | |
| Postal Code | City | Country | | | | |
| E-mail | Teleph | one | Fax | | | |
| | | | | | | |
| A. REGISTRATION Ple | ease, mark the chosen op | otion | | | | |
| Full Registration (incl. Lunch on Nov 15, 16 & 17) up to 15th October, 2007 | | | | | | |
| _ | | Student Member** | 80,00€ | | | |
| Non Member 16 | 60,00€ | Student Non Member** | 120,00 € | 3 | | |
| Full Davidston that the | Louish an Navi 15, 16 | C 17) - G 15-b O | L 2007 | | | |
| _ | | & 17) after 15th Octo Student Member** | ber, 2007 ☐ 130,00 € | , | | |
| | | Student Non Member ** | | | | |
| | | | • | - | | |
| · — · | - | ctober, 2007 (EPSA me | ⊢ | | | |
| EPSA Member* 50 | 0,00€ | Student Member** | _ 30,00 € | | | |
| Conference Only Registration after 15th October, 2007 (EPSA members only) EPSA Member* □ 100,00 € Student Member** □ 80,00 € | | | | | | |
| * EDSA mombars must s | and the cortificate of the | accociation attached to | thic registration | an form | | |
| * EPSA members must send the certificate of the association attached to this registration form. ** Students must send a copy of the student card attached to this registration form. | | | | | | |
| P. AVAILABLE ACCOM | IMODATION Places m | ark the chosen option | and we will | do the booking | | |
| reservation | IMODATION Flease, III | ark the thosen option | and we will | do the booking | | |
| Category | HOTEL Room (price per day and single room or double room for two person | | | | | |
| 5**** | HOTEL MELIÁ MADRID1 | | _ | Double room | person) 187,25 € | |
| 4 *** | NH SUITES PRISMA ₂ | Individual room | • | Double room | 149,80 € | |
| 4*** | HOTEL TRYP ATOCHA ₃ | Individual room | • | Double room | 149,00 € 155,15 € | |
| 3*** | HOTEL ABBA ATOCHA | Individual room | • | Double room | 133,13 € 88,85 € | |
| 3*** | NH ALBERTO AGUILERA | | 133,75 € | Double room | 00,05 € 144,45 € | |
| 3*** | NH ARGÜELLES6 | Individual room | • | Double room | 144,45 € 126,30€ | |
| 3 | NH ARGUELLES | marviduai room | 111,50 € | Double room | 120,30€ | |
| | | Prices per roc | om and night. Bi | reakfast and taxes | included (7%) . | |
| Check in date | Check out date _ | N $^{ m o}$ of nights | : | | | |
| Nº persons | Nº rooms | | | | | |
| Dead Line for Reserva Hotel Meliá Madrid, Octo NH Suites Prisma, Octob | ber, 10 th | | Sub | ototal B | _€ | |

After these dates, we are not able to confirm the hotel booking. Reservations would be subject to availability.

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Hotel Tryp Atocha, October, 1st

NH Argüelles, October, 1st

Hotel Abba Atocha, October, 15th

NH Alberto Aguilera, October, 1st

| C. TRANSFER . Please fill in your flight details if you want to use this service |
|--|
| Note: Cars will be arranged from the airport or station to the hotel and vice-versa |
| Day of arrival to Madridat hours in the ticket flight nº of the airlines company origin |
| Day of departure to Madrid at hours in the flight ticket n^{Ω} of the airlines company |
| Price per car / transfer * 52,60 € (*) The price is per car and transfer. |
| Subtotal C € |
| |
| |
| D. TRAVEL INSURANCE. POLIZA Nº 07620000607. Please mark if you wish to use this service |
| I wish to buy travel insurance in the trip: |
| YES NO No No insured persons Price Travel Insurance* 7,50 € (*) Price per person and insured |
| |
| Subtotal D€ |
| E. AMOUNT TO PAY : |
| Subtotal A (registration)€ |
| Subtotal B (accommodation) € |
| Subtotal C (transfer) $	extstyle \mathcal{E}$ TOTAL AMOUNT to PAY |
| Subtotal D (travel insurance)€ |
| |
| |
| Method of Payment: |
| Credit Card: |
| VISA \square MASTERCARD \square AMERICAN EXPRESS \square DINERS CLUB \square EL CORTE INGLES \square |
| - First name / Last name |
| - Credit card number |
| - Expiration date |
| - Amount to pay |
| |
| Bank Transfer: |
| \square Bank transfer from Spain \square Bank transfer from outside Spain |
| BANCO SANTANDER CENTRAL HISPANO . BBVA C/ALCALÁ, 16 28014 MADRID (SPAIN) |
| Nº CUENTA : 0049 1500 03 2810355229 Nº CUENTA: ES9701823999370200664662 CODIGO: BBVAESMMXXX |
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Important Note: Please send the registration form and find enclosed a copy of the bank transfer, EPSA membership proof and student proof by fax to the number 91 559 44 43 , by post or by mail

We regret that no refunds can be made for cancellations received after October1st, 2007.

^{*} Last date to send us this form: October 1st, 2007