

Seminar XVI – Macedonia, Northern Greece, Cyprus - June 21 to 30, 2014

REGISTRATION FORM

To reserve a place at the seminar, kindly complete the Registration Form and the Medical Insurance Statement.

Deadline for registration: January 15, 2014

Name: (Surname, First name)	(Mr./Mrs./Ms./Dr.)		
Mailing address:			
Telephone (including internat	ional code):		
Fax:	Email:		
Nationality:			
	Flight No:		
Date of departure:	Flight No:	Time:	

The Seminar commences with registration at 3:00 p.m. on Saturday, June 21, 2014 and concludes on Monday evening, June 30, 2014. Flights back home should be booked from Tuesday morning, July 1, 2014 onwards.

SEMINAR FEES

\$2900 USD per person – **due by February 15, 2014**.

The comprehensive fee for the seminar includes hotel accommodations in Macedonia, Northern Greece and Cyprus (single and/or shared), all meals, beverages, excursions, activity fees, gratuities, and seminar sessions.

FINANCIAL AID & SPONSORSHIPS

The Global Connections Fund has limited resources of financial aid for sponsorship of needy participants to attend seminars. All requests for financial aid and sponsorships should be directed to Marianne Ostendorf at the address listed on the bottom of this form.

PAYMENT INSTRUCTIONS

Bank wire payments must be made in US dollars. Instructions for wire payments and bank account information will be sent directly to each seminar attendee via email.

<u>Payment by check</u>: Checks drawn on US dollars should be made payable to **The Hotchkiss School/Global Connections 2014** and mailed to 11 Interlaken Road, Lakeville, CT 06039-0800 USA.

Payment Policies:

- All payments must be received by February 15, 2014
- Funds wired must cover wire transfer fees so that the amount received is the total amount of the seminar registration fee
- Foreign checks are not acceptable due to high bank clearing fees
- Credit card payments are not accepted
- Full registration fee is non-refundable once paid

MEDICAL INSURANCE STATEMENT

All delegates must be responsible for having adequate medical coverage for the duration of their participation in the Global Connections Seminar. Neither the Global Connections Foundation, nor the participating host schools, including their officers and directors, will be held liable for any illness or injury sustained during the course of the Seminar. Having adequate medical and other travel insurance coverage is the full responsibility of each participant.

Please sign below to verify that you have read and acknowledged the above statement and that you will comply with this requirement. Thank you.

Printed Name:	Signature:	
Date:		

Please complete both pages of this form and send via mail or email to:

Marianne Ostendorf, Administrative Assistant Global Connections Foundation c/o The Hotchkiss School Center for Global Understanding and Independent Thinking 11 Interlaken Road, Lakeville, CT 06039-0800 USA Email: mostendorf@hotchkiss.org