



Union Internationale des Avocats
International Association of Lawyers
Unión Internacional de Abogados



V I O N A

**Pleadings before the European Court of Human Rights and
Right to a Fair Trial (Art. 6 ECHR)**
Friday, May 28 & Saturday, May 29, 2010

AUSTRIA

REGISTRATION FORM

Register online at:

www.uianet.org

Please complete and return this form **before May 14, 2010**, by fax, post or email, to:

UNION INTERNATIONALE DES AVOCATS

25, rue du Jour 75001 Paris, France ♦ Tel: +33 1 44 88 55 66 ♦ Fax: +33 1 44 88 55 77 ♦ Email: uiacentre@uianet.org

UIA INDIVIDUAL MEMBERS

Please specify your membership number (Please check your membership card or membership fees):

MI _ _ _ _ _

Family Name :

First Name :

Firm :

Address :

Post Code :

City :

Country :

Tel : Fax :

E-mail :

Date of Birth :

A. SEMINAR REGISTRATION FEES

	UIA Member	Non Member
Standard Registration	350 €	400 €
Young Lawyers (<35)*	300 €	350 €

* Please attach copy of your proof of age to the registration form to benefit from young lawyers fee.

B. SEMINAR SOCIAL ACTIVITY

Please indicate below whether you plan to attend the following event, included in the cost of your registration.

Lunch – Friday, May 28

C. OPTIONAL ACTIVITY

(*not included in the registration fees*)

Optional Dinner – Friday, May 28

♦ Please book person(s) for the dinner on Friday, May 28

40 € x ___ pers

D. TOTAL

TOTAL (A) Registration Fees

€.....

TOTAL (C) Optional Activity

€.....

TOTAL (A+C) €.....

Date:/...../.....

Signature :.....

E. METHOD OF PAYMENT

♦ By cheque in € payable to the UIA, addressed to: UIA - 25 rue du Jour - 75001 Paris – France

♦ By bank transfer in € without charges to the payee, payable to the Union Internationale des Avocats account and quoting “2010 Vienna Seminar”

Société Générale – 8 avenue du Président Wilson - 75116 Paris – France.

Bank Code: 30003

Sort Code: 03170

Account N°: 00050320729 - RIB: 06

Swift N°: SOGEFRPP

IBAN: FR76 3000 3031 7000 0503 2072 906

♦ By credit card :

Visa

Eurocard / Mastercard

Card N° : _____

Expiry date: __ / __

Name of card holder:

I authorise the Union Internationale des Avocats to debit the above mentioned credit card in the amount of: **€ (EURO)**.....

Date:/...../.....

Signature:

F. CANCELLATION CONDITIONS

In case of cancellation received at the UIA before April 28, 2010; 50% refund of the amount paid minus € 50 (administrative costs).

No refund thereafter.