

## Registration Form

### 3<sup>rd</sup> Pankyprian WELLNESS & FITNESS Conference 2009

PERSONAL INFORMATION	
Surname:	First Name:
Mobile No.:	Telephone at Home:
E-mail:	
Address:	
Area - Municipality:	Postal Code:
District - City:	

PLEASE FILL IF YOU WORK IN A SPORTS COMPANY OR ORGANISATION	
Name of the Sports Company/Organisation:	
E-mail:	
Address:	
Area - Municipality:	Postal Code:
District - City:	
Telephone:	Fax:

MAIN CONFERENCE SELECTION	1 DAY BEFORE 04/03/2010	1 DAY FROM 04/03/2010	2 DAYS BEFORE 04/03/2010	2 DAYS FROM 04/03/2010
		20 € <input type="checkbox"/>	30 € <input type="checkbox"/>	30 € <input type="checkbox"/>

WORKSHOPS SELECTION	1 WORKSHOP	2 WORKSHOPS	3 WORKSHOPS	RAD KIDZ
BEFORE 04/03/2010	35 € <input type="checkbox"/>	60 € <input type="checkbox"/>	75 € <input type="checkbox"/>	150 € <input type="checkbox"/>
FROM 04/03/2010	45 € <input type="checkbox"/>	80 € <input type="checkbox"/>	90 € <input type="checkbox"/>	170 € <input type="checkbox"/>
	PERSONAL TRAINING <input type="checkbox"/> MAX 70 PERSONS	YOGA & PILATES <input type="checkbox"/> MAX 30 PERSONS	MARKETING & MANAGEMENT <input type="checkbox"/> MAX 70 PERSONS	RAD KIDZ <input type="checkbox"/> MAX 20 PERSONS

**Waiver**

I declare that all my personal details above are true, I had read the terms and conditions of the conference which I will follow during the event and I am also familiar with the cancelation policy. I willingly participate in all aspects of the 3<sup>rd</sup> Wellness & Fitness Conference at my own risk. I am in reasonable physical health and acknowledge that when engaging in exercise routines or similarly strenuous activity, I may suffer injury, illness or death. I assume the risk, of, and the responsibility for any injury, illness, death or property resulting from my participation in any activities and will not seek to penalize, prosecute or claim compensation from the organisers, sponsors, suppliers, presenters or participants. Additionally I understand that I may be photographed, filmed, videotaped or audio-taped during the conference and understand that A.C. Provision for Sports Ltd, Grafts Hellas and Radical Fitness will own all or part of any such film, tape or recording and use of it for any commercial and non-commercial purposes without providing remuneration or seeking my permission. I have read and understand this waiver and know how its affects my legal rights.

NOTE: Issues of personal data protection are very high in the priority of A.C. Provision for Sports Ltd, , Grafts Hellas and Radical Fitness. All information and contact details that we receive are used only for the purpose of keeping you informed of forthcoming conferences, seminars, exhibitions, publications or providing electronic information which might be of interest to you. Such data is never used by other companies or organizations or for any other purpose.

If you **DO NOT** like to receive information from our company, either by post or by electronic means please tick the box here:

**Total Cost:** \_\_\_\_\_ €  
(FOR INTERNAL USE )

**Date of Registration:** \_\_\_\_\_

**Signature:** \_\_\_\_\_  
(Registration Forms sent by email will be sign on the way in to the conference)