

REGISTRATION FORM

UIA 2020 VIRTUAL CONGRESS
October 28-30, 2020

Register online at **www.uianet.org**

or please complete and return this form, by email, fax or post, to:

UIA (International Association of Lawyers)

20 rue Drouot, 75009 Paris, FRANCE

Tel: +33 1 44 88 55 66 / Fax: +33 1 44 88 55 77 / Email: uiacentre@uianet.org

Family Name:

First Name:

UIA Identification number (if you already have one): M I _____

Firm:

Address:

Post Code: City:

Country:

Tel: Fax:

Email:

Date of Birth:

A. REGISTRATION FEES

	Until September 30, 2020	From October 1, 2020 onwards
UIA Member Standard (categories 1 & 2 as per the UIA list)*	€ 300	€ 350
UIA Member Emerging country (categories 3 & 4 as per the UIA list)*	€ 200	€ 250
Non-Member	€ 400	€ 450

** The list is available on the UIA Website: www.uianet.org, membership section*

TOTAL REGISTRATION FEES €.....

B. CANCELLATION CONDITIONS AND GENERAL CONDITIONS

I, the undersigned, confirm having read and accepted the cancellation policy and the general terms and conditions given on virtualcongress.uianet.org. My registration will only be taken into account after receipt of my payment.

The participant is aware that his/her image and/or voice may be recorded or filmed during the entire duration of the Congress and, by signing this registration form, grants UIA the right to use, reproduce and distribute the concerned images and recordings by any known or unknown means and on all types of media, for an unlimited duration, completely free of charge.

The undersigned acknowledges having been informed of the processing of the personal data contained in this form by UIA, as detailed on virtualcongress.uianet.org.

C. METHOD OF PAYMENT

By bank transfer in €, without charges to the payee, in favour of the Union Internationale des Avocats, quoting “UIA 2020 Virtual Congress”, to the following bank and account:

Société Générale – Paris Elysées Entreprise
91, avenue des Champs Elysées – 75008 Paris - France
BIC / SWIFT N°: SOGEFRPP
IBAN: FR76 3000 3033 9200 0503 4165 164

Kindly attach a copy of your bank transfer order to your registration form

By credit card: Visa Mastercard

Card N°: _____

Expiry date: __/ __

3 digits: ___

Name of card holder:

I authorise the Union Internationale des Avocats to debit the above mentioned credit card in the amount of € (EUR)

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

Signature: