



## REGISTRATION FORM ADVANCED COURSE

Name and Surname \_\_\_\_\_

Place and date of birth \_\_\_\_\_

VAT Number \_\_\_\_\_

Invoicing address \_\_\_\_\_

ZIP / Postal code \_\_\_\_\_ City \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Mail address \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

### **BANK TRANSFER**

#### **COURSE € 2.200**

#### **€ 400.00 INITIAL DEPOSIT PAYABLE UPON REGISTRATION**

Bank: BCC Romagna Occidentale

Bank address: via P. Togliatti 25 40026 IMOLA (BO) - ITALY

Account holder: dr.Giampiero Ciabattani Account number: 00016870

IBAN:IT32 Y 08462 21001000005027608

Swift / BIC Code: CCRTIT2TROC

The registration is considered complete when the deposit payment is received at dr.Giampiero Ciabattani by bank transfer or credit card. Cancellation policy: if, for any major reason, the lecturer will not be able to hold the course, the full registration fee will be refunded.

Please contact for any information

by e-mail: [info@giampierociabattani.com](mailto:info@giampierociabattani.com)

by fax: +39 0546796982