

Application Form

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| **Conference Details** | **Title:** 1st Annual Culture Conference in Greece**Date:** March 9, 2018**Location :** Glyfada Golf Gardens |  |
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| **Company****Details** | **Company Name:** **Industry:** **Address:** **Postal Code - City:** [**VAT Number - Tax Office:**](https://www.google.gr/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0ahUKEwjD6eSSwuHYAhXHjCwKHRG3AlwQFggnMAA&url=https%3A%2F%2Fwww.proz.com%2Fkudoz%2Fgreek_to_english%2Flaw_contracts%2F1223787-%25CE%25B1%25CF%2586%25CE%25BC_%25CE%25B4%25CE%25BF%25CF%2585.html&usg=AOvVaw3BWmDrtRTzF5ousEqBpB9T) |  |
|  |  |  |
| Contact Address | **First Name:** **Last Name :** **Job Position:** **Telephone Number:** **Fax:** **Email:** |  |
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| OAED Program (LAEK 0.24)Participants |

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| Yes |  |
| No |  |

**Name Job Position Ε-mail****1)****2)****3)****4)****5)****6)****7)****8)** |  |
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| Conference Organizer | **Company Name:** Achieve Performance A.P. Group SA**Bank:** National Bank of Greece**Bank Account:** 669/ 001117-75**IBAN:** GR5701106690000066900111775**Swift** / BIC: ETHNGRAA |