**Application form**

**International Scientific Conference**

REDISCOVER THE FORGOTTEN. PRESERVE THE DISCOVERED.

Authenticity problems in cultural tourism

**September 27-28th, 2018**

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| --- | --- |
| **Basic Information** | |
| **Name/Names** |  |
| **Last name** |  |
| **Academic degree** |  |
| **Institution** |  |
| **Correspondence address** |  |
| **Phone** |  |
| **E-mail** |  |
| **Type of report** | conference presentation |
| **Identities of the co-authors** |  |
| **Title of the paper** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Options of participation** | | | | |
| *You would like your paper to be published in:* | | |  | |
| * Sprawy Narodowościowe <Nationalities Affairs> | | | Yes  No | |
| * Czas Kultury | | | Yes  No | |
| * Studia Ekonomiczne i Regionalne <Economic and Regional Studies> | | | Yes  No | |
| * monography (in English) | | | Yes  No | |
| **Hotel reservation**  (conference fee does not cover accommodation) | | | | |
| Single room - 70 PLN | September 26th/27th | September 27th//28th | | September 28th/29th |
| Yes  No | Yes  No | | Yes  No |
| Double room - 50 PLN | Yes  No | Yes  No | | Yes  No |

|  |  |
| --- | --- |
| **Invoice:**  Invoices will be issued after the payment is cleared only. In other cases, please, feel free to enquire. | |
| **Institution/Company/Person** |  |
| **Address** |  |
| **Post code** |  |
| **City** |  |
| **Tax reference number** |  |

I hereby:

1. agree for the VAT invoice to be issued without the addressee signature,

2. resign from author’s fee,

3. authorize the Conference organizers to process my personal data included in my application form.   
I understand that my personal data will not be forwarded to any third parties, also I am allowed to ament it at any time. I disclose my personal data voluntarily in accordance with the Personnel Protection Act of 29.08.1997, amended in 2002, no 101 position 926.

4. Promise to transfer the conference/publication fee by **July 1st**, **2018** to the bank account nr:

**...................63 1240 2177 1111 0000 3570 3633**

**with a note: KulTur\_2018, name and surname of conference participant**

**The cost of currency conversion is covered by conference participants (approx €5).**

Please, email your application form by **June 1st, 2018** to [godlewskig@wp.pl](mailto:godlewskig@wp.pl)

Date **……………** Signiture  **……………….**