

INTERNATIONAL CONFERENCE

C. R. E. D. I. T. 2002

ASSESSING THE RISK OF CORPORATE DEFAULT

Venice, Italy

19-20 September 2002

Ateneo Veneto

REGISTRATION FORM

| Personal details | |
|---|----------------|
| Name: | |
| Surname: | |
| Designation: | |
| Institution/Organisation: | |
| Please state willingness to act as discussant: <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Mailing address (Please state the address you would like to be inserted in the list of participants): | |
| Country: | |
| Telephone: | |
| Fax: | |
| E-mail address: | |
| Date of arrival | Departure date |

ACCOMMODATION FORM

Hotel information

We have organised for you to be lodged in the Residences situated in the historic centre of Venice, all of which are hosted in newly restored historical buildings, including old monasteries or *Palazzi* on the Grand Canal. All rooms have a bathroom *en suite*. Most Residences can serve breakfast.

As the conference will take place during the peak season for tourism, we cannot guarantee hotel accommodation after July 20 2002, which is the deadline set for registration. Generally, a “first come-first served” rule will apply.

The approximate price for your rooms are: € 75,00 for a single room and € 95,00 for a double room. Upon receiving your registration and accommodation forms, duly filled in, we will inform you of the exact prices and any other information on how to reach both your hotel and the conference venue. We can only guarantee your reservation upon receipt of a € 100,00 deposit.

| | | |
|-----------------|----------------|---------------|
| Date of arrival | Departure date | No. of nights |
|-----------------|----------------|---------------|

| | |
|-------------|-------------|
| Double room | Single room |
|-------------|-------------|

| | |
|----------------------|--|
| Dietary requirements | |
|----------------------|--|

Social Program

September 19 (Thursday): a conference dinner will be organised. Those wishing to take part in the dinner are kindly requested to state how many people will attend and to include the fee of 50,00 € for each attendee in the final payment. Please, inform if you have any dietary requirements.

| | | |
|-------------------|------------------|---------|
| Conference dinner | Number of people | € 50,00 |
|-------------------|------------------|---------|

September 21: guided tours will be arranged for participants and their guests. Please state your chosen tours and the number of participants in the table below.

| | | |
|---|------------------|---------|
| TOUR 1 (September 21- Morning) Classical Venice (S. Marco Square, Basilica, Palazzo Ducale) (Duration: two hours) (min 10 people) | Number of people | € 18,00 |
| TOUR 2 (September 21- Afternoon) Unknown Venice (Duration: two hours) (min 10 people) | | € 18,00 |
| TOUR 3 (September 21- Morning) Boat trip through the lagoon islands (Duration: four hours) (min 30 people) | | € 60,00 |

Registration fee

The registration fee includes: admission to all scientific sessions, lunches and coffee during the meeting conference package.

Please be careful while filling in the section on the payment of registration fees: be sure to take note of the required payment method and the account payment should be made.

| | |
|--|----------|
| Registration fee Academics | € 200,00 |
| Registration fee Practitioners | € 500,00 |
| Registration fee Academics presenting a Poster | € 100,00 |
| Registration fee Practitioners presenting a Poster | € 300,00 |
| No registration fee for participants presenting a paper and PhD students* | |

* To be eligible for the waiving rate, students are requested to send a copy of their student ID or any other certificate to the **Conference Organizing Secretariat**.

| | |
|--|----------|
| REGISTRATION FEE (Academics) [€ 200,00] | |
| REGISTRATION FEE (Practitioners) [€ 500,00] | |
| REGISTRATION FEE (Academics presenting a Poster) [€ 100,00] | € |
| REGISTRATION FEE (Practitioners presenting a Poster) [€ 300,00] | |
| Please mark the appropriate fee | |
| CONFERENCE DINNER [€ 50,00 for attendee] | € |
| TOUR 1 [€ 18,00 for participant] | € |
| TOUR 2 [€ 18,00 for participant] | € |
| TOUR 3 [€ 60,00 for participant] | € |
| ACCOMMODATION DEPOSIT | € 100,00 |
| TOTAL | € |
| Please state the total | |

Method of Payment

Payments can be made either by bank transfer or by credit card

FOR ACADEMICS

I enclose a copy of the Bank transfer payable to Comitato Organizzatore **C.R.E.D.I.T. Credito Bergamasco, Agenzia 171, Venezia, account No 42575 Abi 03336, Cab 02071**, swift code CREDIT22. The total due amounts should be issued to the conference organisers net of all bank charges that shall be borne by the sender.

I enclose my credit card details (only Visa and Mastercard are accepted):

Type of credit card _____

Owner of credit card _____

Number of credit card _____

Expiring date _____

FOR PRACTITIONERS

I enclose a copy of the Bank transfer made out to Nexa sas, **Banca IntesaBci, Agenzia Rialto, Venezia, account No. 58907810284, Abi 3069, Cab 2045**. The total due amounts should be issued to the conference organisers net of all bank charges that shall be borne by the sender.

I enclose my credit card details (only Visa and Mastercard are accepted):

Type of credit card _____

Owner of credit card _____

Number of credit card _____

Expiring date _____

Cancellation and refunds

Should a delegate be unable to attend, a substitute may attend the conference in his/her place. Written notification of cancellation must be given.

- 70 % of the registration fee will be refunded upon reception of a written refund request no later than July 31st
- 50% of the registration fee will be refunded upon reception of a written cancellation request no later than August 30th
- No reimbursement of the registration fee will be possible for cancellations received after August 30th

I hereby authorise **NEXA** to include my details in its mailing list for the distribution of information material. In accordance with the Italian Privacy Law, I may have access to these details at any time and request their modification and cancellation.

Venice, _____

Signature

Please send this registration form to the **Conference Organizing Secretariat:**

Nexa

Phone +39-041-5210255-Fax +39-041-5285041

E-mail: nexa@flashnet.it

REGISTRATION DEADLINE: 20 JULY 2002