

GROUP REGISTRATION FORM



Please fill out the information below for each person attending using capital letters or type.

1) MAIN CONTACT PERSON This will be the main contact for the group registration

Contact person name	
Contact person email	
Contact person telephone (including dialling code)	Total amount of attendees
your delegation register ten persons (full confe	etion fee which enables you to send one free participant should erence fee, excluding accompanying and youth). If you register ATION FEE for the eleventh delegate is WAIVED.
Is your organisation an ICA Direct Member?	☐ Yes ☐ No
Name of the Organisation	
Acronym	
Name of the organisation to appear on your badge (Max 25 characters)	
Address	
City	Postal Code
Country	
Telephone (including dialling code)	Fax
VAT number for invoice (if needed)	

ONE COPY PER ATTEND	EE. You may make more copies of this page as needed.	Attendee number
3) ATTENDEE DETAILS PI	ease tick whichever is applicable.	
Title Mr Mrs Ms	Other:	
FAMILY NAME (S) (this field will appear on your badge)		
FIRST NAME(S) (this field will appear on your badge)		
Job Title (this field will appear on your badge)		
Direct email		
Working Language (for the conf (You may choose more than one)	erence)	ussian 🗌 Spanish
In which language would you lik (Please tick only one option)	ce to receive our information/notifications?	rench 🗌 Spanish
4) REGISTRATION FEES		
The participant will attend the co Please, tick only one category. T	nference in the capacity of: These prices exclude accommodation.	Prices in Swiss Francs
	ing on behalf of an ICA member organisation)	CUE COO
☐ from non-African countries ☐ from African countries		CHF 800 CHF 600
	filiated to an ICA member organisation)	
from non-African countries	-	CHF 1000
from African countries		CHF 700
☐ Youth - under 30 (please a	ttach copy of your passport)	CHF 200
☐ Accompanying person ⁽²⁾ (maximum 1 accompanying person per participant)	
Title Mr FAMILY NAME (S)	Mrs Ms Other:	7
(this field will appear on		CHE 13E
your badge) FIRST NAME (S)		CHF 125
(this field will appear on your badge)		
☐ I will also participate in da (If you wish to attend the whole c	ay 1 of the ICMIF conference (6 November 2013) ⁽³⁾ onference please visit http://www.icmif.org/capetown/register)	CHF 450
(Amongst others: wine co-operative	the Co-op visit (2 November 2013) ves, handicraft co-operatives, etc.) 4 departures per day, including a on (shuttle) The visits will take place at a venue where the wine co- for tasting and for sale.	³ CHF 50
5) OTHER REQUESTS		
	s (please specify) Accessibility Requirements	
	TOTAL AMOUNT TO DAY FOR THIS	DADTICIDANT
	TOTAL AMOUNT TO PAY FOR THIS	PARIICIPANI
	CHF	



6) AMOUNT TO DONATE		
I would also like to make a donation	to the ICA Africa Endowment Trust Fund of:	
☐ CHF 20 ☐ CHF 50 ☐ C	HF 100 Other CHF I prefer not	to donate
	on of the Fund will be announced at the ICA Afric and will be used to secure the financial sustainabi	
7) SPONSORSHIP OPPORTUNIT	ries .	
will be an excellent opportunity to pro	attract up to 2,000 participants from over 80 coumote your organisation and institution. By becomowth of the Co-operative movement and will also	ning a sponsor you wil
Please send me a copy of the solution Please send me a copy of the copy of the solution Please send me a copy of the solution Please send me a cop	sponsorship brochure. nt to the main contact email address.	
8) PAYMENT METHODS		
	ation form you will be sent an invoice. You may n on our website. All registrations are subje are not accepted.	
ou may make your payment by bank to make the payment.	transfer or credit card. Please inform us which	method you will use
	(until 13 th of October 2013) to: Kindly issue an to make payment "without charges to the be	
1 1	NTERNATIONAL CO-OPERATIVE ALLIANCE .50 ROUTE DE FERNEY PO Box 2100 .211 GENEVA 2 - SWITZERLAND	
Address 6	BANK COOP 5-8, PLACE LONGEMALLE CH-1211 GENEVA, SWITZERLAND	
IBAN (Bank account num C	ber): CH73 0844 0284 0434 5009 0	
	COOPCHBBXXX Contact person surname (to help us to identify yo	our payment)
incur a fee of 3%. Credit card pay	edit card payments are only possible by Visa or larger ments by American Express are not possible. It card, please provide the following details to fax:	
Type of card: ☐ Visa ☐ Ma Card number	aster Card	
Owner name Expiration date	REGISTRATION FEES	CHF
	3% of charge fee (Only applicable for payment by credit card. Non applicable for donation)	СНЕ
	DONATION	CHF
	TOTAL AMOUNT TO PAY	CHF



[NOTES FOR REGISTRATION AND PAYMENT]

Registration fees: The full registration fee includes the entrance fee for all meetings and events on the programme (unless otherwise specified), processing of registrations and registration materials, official documentation, and coffee breaks, lunches, Welcome Reception and Celebration of Co-operative Dinner from 3-5 November (in the designated ICA conference break and lunch areas only). Your fee doesn't include accommodation costs. We reserve the right to charge an **administrative fee** (CHF 50) for changes you make to your individual or group booking.

You are not registered until your full payment has been received by the ICA: Registrations will only be valid once the payment has been completed.

- (1) There is a **special group registration fee** which enables you to send one free participant should your delegation register ten participants (full conference fee, excluding accompanying delegate and youth delegate). If you register 10 FULL FEE paying participants, the REGISTRATION FEE for the eleventh delegate is WAIVED. If you register 20 participants, then you entitled to send two additional free participants. In order to take advantage of this reduction, you must register your whole delegation as a single group. After you register your group, you may make substitutions, amendments, additions but not cancellations. You will receive **one invoice for your entire group.** The ICA will not be able to provide separate invoices for each member of your group unless you register separately, in which case you would **no longer** be eligible for the group discount.
- (2) **Accompanying** persons are entitled to participate only in the Welcome Reception and Celebration of Co-operative Dinner. Accompanying persons normally include spouses and partners and they must accompany a registrant. Accompanying persons are not permitted in any business session unless they complete the full registration.

The **youth registration** is only applicable for those under the age of 30 before 1 November 2013.

We welcome members of the **Press.** To apply for Media Accreditation please email huckerby@ica.coop. Press are invited to attend the Conference free of charge.

Visa letter requests: If you need to obtain a visa letter confirming your conference registration, we can provide a confirmation letter of your booking once you have registered for the conference and after your payment has been processed. Please fill out a visa letter request form for each delegate, which can be downloaded from the "Visas" section on the event website.

1 1	Tick this box if y	vou need	us to s	sena v	ou the	visa	ietter	reduest.
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Cancellations: Group cancellations are not permitted. However, substitutions will be permitted. Individual cancellations received after 30 September will not be refunded.

Accommodation: This is not your registration for the hotel accommodation. If you need to book a room, please visit the "Hotel" section on the event website or contact MyPlanner at ica@myplanner.co.za or Telephone: +27 44 693 2157 or Fax: 0027 (0) 21 441 1537.

(3) International Co-operative and Mutual Insurance Federation (ICMIF) Conference: ICA Conference participants are invited to attend the first day of the ICMIF conference at a special daily rate. To take advantage of this offer, you must register for the ICA conference and tick the box to say that you also wish to attend day 1 (6th November) of the ICMIF conference. Your invoice for the ICA conference will include both fees, and you do not need to register separately with ICMIF. Do not tick the ICMIF box if you wish to attend the whole conference. If you wish to attend the entire ICMIF conference from 6-8 November, you must register and pay separately with ICMIF http://www.icmif.org/capetown/register.

I accept the terms for registration and payment.

Date:	Signature:

Please return the form duly filled to:

International Co-operative Alliance (ICA) capetown2013@ica.coop
Tel. + 32 2 743 10 30
Fax + 32 2 743 10 39

