



REGISTRATION FORM

Mr. / Ms. / Mrs.

First Name / MI / Last Name

Title/Position

University / Departement / School

Mailing Address

City / State / ZIP / Country

Email Address

Phone Number

Full Name of Accompanying Person

Participant's Information

Every participant has to fill out a separate form.

Please note that the information you will provide will appear on your badge and the list of participants. Please print your completed registration form and return it by e-mail, regular mail or fax.

Registration Fees

Cost includes tuition, six night's hotel accommodation, lunches, refreshments, study materials and excursions. **A non-refundable partial payment of 600, - Euro by Banken Transfer will be due at the time of registration.** The remainder will be due at the beginning of the course on the first day or you may choose submit payment, in full with your registration.

Regular registration: 2000, - Euro, if received from May 15st, 2015
Registration will not be possible after June 15th 2015.

Method of Payment

By bank transfer (please include all applicable bank transfer fees)

Reference:	Delegate Name and Country
Account name:	Arbeitskreis Architekturästhetik e.V.
Account number:	304 732 1009
Bank:	Dresdener Volksbank Raiffeisenbank eG
Sort Code / BLZ:	850 900 00
IBAN:	DE 05 85090000 3047321009
BIC / Swift Code:	GENODEF1DRS

Return Address

Email: architekturaesthetik@me.com

Fax: +49 351 4633 5006

Lehrstuhl Raumgestaltung
Arbeitskreis Architekturästhetik

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