



10th Outdoor Origami Meeting

April 30th - May 2nd Krakow, Poland

Registration card

Personal data:

First / Given Name _____

Family Name: _____

Street address _____

Post code _____

Town _____

Country _____

e-mail: _____

phone: _____

I agree to put the following personal data on the participant list handed to all convention participants: my name, town, country, e-mail address ☐ yes / ☐ no

I will attend the convention on the following days:

Friday 29.04 ☐

Saturday 30.04 ☐

Sunday 01.05 ☐

Monday 02.05 ☐

I order

A. ☐ Full package _____ 220 zł

covering:

- Conference
- Two nights, April 30/May 01 and May 01/02 in a dormitory, 2 persons per room.
- Meals (lunch and supper 30.04; breakfast, lunch and supper 01.05; breakfast and lunch 02.05)
- ☐ April 29/30 additional night (30 zł/person)
- ☐ May 02/03 additional night (30 zł/person)
- ☐ I offer a workshop and I qualify for 10 zł discount.

Total _____

B. ☐ A la carte

☒ conference fee (mandatory) 80 zł

Accommodation: ☐ 29.04/30.04 in a dormitory (35 zł/person/night)

(nights) ☐ 30.04/01.05 in a dormitory (35 zł/person/night)

☐ 01.05/02.05 in a dormitory (35 zł/ person/night)

☐ 02.05/03.05 in a dormitory (35 zł/ person/night)

☐ I do not need accommodation

☐ I will sleep in the hotel (I will reserve myself)

☐ I will sleep in the hotel (I need help to reserve a room)

Meals (hotel breakfast is included in the rate, do not mark breakfast in such case; a dormitory rate does not include breakfast)

Saturday 30.04 ☐ lunch 13 zł ☐ supper 9 zł

Sunday 02.05: ☐ breakfast 9 zł ☐ lunch 13 zł ☐ supper 9 zł

Monday 03.05 ☐ breakfast 9 zł ☐ lunch 13 zł

☐ I offer a workshop and I qualify for 10 zł discount.

Total _____

I would like to share a room with _____ (only if you have selected a dormitory)

Please fill the second page as well

Workshop

I would like to teach: ☐ yes / ☐ no

Title (model) _____

Designer: _____

Difficulty level: ☐ simple / ☐ intermediate / ☐ high intermediate / ☐ complex

Title (model) _____

Designer: _____

Difficulty level: ☐ simple / ☐ intermediate / ☐ high intermediate / ☐ complex

I understand that I qualify for 10 zł discount if I offer a workshop.

Diagram

I will send a diagram for conference book: ☐ yes / ☐ no

Please send your diagram till 15.04.2011

I am a member of:

☐ PCO (Polskie Centrum Origami)

☐ PTO (Polskie Towarzystwo Origami)

☐ other _____

Remarks: _____

Please fill this registration form in electronic format and send till April 15th to the following e-mail address:

Krystyna Burczyk gopco@op.pl

Copy: Krystyna i Wojciech Burczyk burczyk@mail.zetosa.com.pl

All registration cards will be confirmed by e-mail. If you will not receive a confirmation by 3 days, please contact us.

Phone contact::

Katarzyna Dymek-Nowak: +48 669137329, Krystyna Burczyk: +48 602 601 719

International guests may pay all fees in cash on arrival.