

**Date: 15/06/2022 between 12:30 and 14:30**

**Speaker: José Manuel Campa, Chairperson of the European Banking Authority (EBA)**

**Place: Cercle Münster (5-7 Rue Münster, 2160 Luxembourg)**

**Participant's information**

Last Name		
Name		
Company		
Position		
Address		
Zip code/ City/ Country		
VAT Number		
Telephone		
E-mail / Web		
Member of the Chamber	YES	NO
Any food allergy?	If yes, which one?	

**Would like to take part in this luncheon-debate:**

Alone /

Accompanied by

Name-Last Name	Company	Position	E-mail

Price per participant (VAT included)	Member*	Non Member
	80 €	110 €

\* -Benefactor members will have two free invitations

-Those accompanying a member of the Chamber will benefit from the 'member's fare' when being their guests

-I will pay the amount of .....€ by bank transfer to the Chamber's account number **IBAN LU59 0024 1985 0663 0000- IC: BILLULL** indicating the number. The Chamber will send the related invoice after receiving this reply form duly completed and signed. The amount will be fully paid unless express notification of cancellation of the registration received, at least 72 hours before the event. Other participant may replace registered person with prior notice.

- The Chamber reserves the right to not allow the access to the event to all those people who did not pay the subscription fee before the event celebration.

- Unless you previously notify the opposite to the Official Spanish Chamber of Commerce in Belgium and Luxembourg, your participation on this activity allows us the use of your image through the pictures taken by the entity in order to publish news and other publications on the web and social media.

- I accept that this service is submitted to the general sale conditions of the Chamber.

- I wish to receive an invoice: YES NO

- The data indicated here will be used exclusively for purposes related to the event and we will proceed to the destruction of this form once it has been held.  
[ ] I confirm that I have been informed of the purpose of the processing data indicated in this document and expressly authorize the Chamber to treat them in relation to the event.

Estas casillas deberían ser facultativas:

[ ] I want the Chamber to include my information (name, surname and position) in the list of attendees to the event, which will be distributed among all those present in the same.

[ ] I want to be registered in the Chamber's newsletter, with news, activities of the Chamber, information about the members, cultural collaborations and other interesting information.

**Invoicing address (if different from the above):**

In ..... date ..... signature (s)

**To be sent to:**

**Julián F. Szkatulak Couto**

**Official Spanish Chamber of Commerce in Belgium and Luxembourg,**

Tel. +352 661 404 399 | luxemburgo@e-camara.com