

## REGISTRATION FORM



We appreciate your interest in the Executive Education of ESCP Business School. Please take a moment to fill in the registration form and send it back to us! Your information is used for internal, statistical evaluation only. Thank you!

### SEMINAR DETAILS

Selected programmes/modules:

Date/s (dd/mm/yyyy):

.....  
.....  
.....

Total sum (EUR): .....

### PERSONAL DETAILS

|                             |       |              |       |
|-----------------------------|-------|--------------|-------|
| Form of address:            | ..... | Title:       | ..... |
| Surname:                    | ..... | First name:  | ..... |
| Date of birth (dd/mm/yyyy): | ..... | Nationality: | ..... |

### HOME ADDRESS

|                 |       |               |       |
|-----------------|-------|---------------|-------|
| Street:         | ..... | House number: | ..... |
| Postcode, City: | ..... | Country:      | ..... |
| Telephone:      | ..... | Fax:          | ..... |
| Mobile phone:   | ..... | E-Mail:       | ..... |

### COMPANY ADDRESS

|                 |       |               |       |
|-----------------|-------|---------------|-------|
| Company:        | ..... | Sector:       | ..... |
| Street:         | ..... | House number: | ..... |
| Postcode, City: | ..... | Country:      | ..... |
| Telephone:      | ..... | Fax:          | ..... |
| Mobile phone:   | ..... | E-Mail:       | ..... |
| Homepage:       | ..... |               |       |

Use as correspondence address:

Home Address

Company Address

Use as invoice address:

Home Address

Company Address

### YOUR FUNCTION AND POSITION IN THE COMPANY

Department: .....

Function/Position: .....

How many employees does the company have? .....

How many employees are subordinated to you? .....

How many years of management experience do you have? .....

# REGISTRATION FORM



## CAREER

Company: ..... Sector: .....

Function: ..... Period of time: .....

Company: ..... Sector: .....

Function: ..... Period of time: .....

## EDUCATION/STUDIES

Institution: ..... Education /Studies: .....

Period of time: ..... Graduation: .....

Institution: ..... Education /Studies: .....

Period of time: ..... Graduation: .....

## HOW DID YOU HEAR ABOUT THE EXECUTIVE EDUCATION PROGRAMME OF ESCP EUROPE BERLIN?

Advertisement  Recommendation  Internet

Other: .....

Date, Signature: .....

**SENDITBACK!** By e-mail: [jkoch@escp.eu](mailto:jkoch@escp.eu)

### PARTICIPATION FEE

Please remit the participation fee\* completely, with the reference: *Name of programme*, no later than 20 days before the start of the programme to our bank account: IBAN: DE78 1007 0024 0911 2111 00, SWIFT: DEUTDE33HAN30.

Fees cover all programme costs, papers handed to participants and a lunch package during the seminar. Please note that expenses for individual travel and lodging are not included in the participation fee.

### CANCELLATION

A cancellation of participation must be in writing. In case of cancellation that reaches us 14 days before the start of a programme, there is 50% of the registration fee to pay. If participation is cancelled 7 days before the start of a programme and no replacement participant is named, the participation fee must be paid entirely. ESCP Europe, Berlin, reserves the right to modify the content characteristics of programmes on short notice and to cancel the execution of programmes in case of nonachievement of a minimum number of participants. In this case, all payments made prior will be refunded.

For any questions regarding our Executive Education Programmes and the registration, please contact:

Jürgen Koch  
Manager Executive Education  
T: +49 30 320 07-217 or e-mail: [jkoch@escp.eu](mailto:jkoch@escp.eu)

\*Costs/participation fee: The participation fee is exempt from value-added tax according to Art. 4(22) of the German VAT code (UStG).