5^{th} International Summer School on Business Mediation. ISBM 2012 **Past . Present . Future** July 16 – 20, 2012, Admont, Austria



REGISTRATION FORM ISBM 2012

Title:									
First name:									
Surname:									
I took part in the:			ISBM 2004 □	ISBM 2006	ISBM 200	8 🗖	ISBM 2010 □		
My contact details:									
Institution:									
Street, No.									
Postcode:		Town:							
Tel.:		Mobile:							
E-Mail:									
Invoice recipient ☐ as above ☐ as follows:									
Institution:						VAT No.:			
Street, No.									
Postcode:		Towr	n:			Cou	ntry:		
E-Mail:									
Participant fees Monday to Friday									

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			Participation at a	previous ISBM: 5% discount*)
Early bird I (by 31.12.2011)	€ 1,850	plus 20% VAT	€ 1,700	plus 20% VAT
Early bird II (by 31.3.2012)	€ 2,050	plus 20% VAT	€ 1,900	plus 20% VAT
Participant fees as of 1.4.2012	€ 2,250	plus 20% VAT	€ 2,100	plus 20% VAT

^{*)} cannot be combined with other discounts

For registration of three or more participants of the same company we grant 10% discount.

Services included in price:	Participation in all the events of the ISBM • Documentation • coffee breaks, daily lunch, dinner Monday – Thursday • Local transport for activities in National Park • Access to the ISBM website's Member Area before and after the event					
Not included in price:	Travel expenses, lodging, breakfast					



Micro-sponsoring

I would like to be a micro-sponsor of the **5th International Summer School on Business Mediation** (For details on our micro-sponsoring offer, please see enclosure).

□ Scholarship for (please give first name and surname): Contact details for free participant: (Postal address) (Mail) (Telephone)					Scholarship for (number of free places) from a non-profit organi cannot finance participation (selection to be made by or	participants sation, who themselves
I was made aware of the ISBM 2012 by the following						
☐ Personal recommendation from					Folder	
					Advert	
					Other (which?)	
☐ Mail from the organizer						
☐ Homepage (www.isbm.at)						
My mediation qualifications						
		with:				
		Number of training hours:				
Other qualifications in the areas of conflict, conflict management, mediative competences		Please spec	cify:			
□ None						
My ı	My mediation experience (multiple responses allowed)					
· ·			pract	cical mediation experience		
main job			Carry out mediations regularly			
My main profession						
tax adviser/auditor			psych	/chotherapist/psychologist		
lawyer/notary				e coach/counsellor		
management consultant			Other	-:		



Supplementary programme

Programme for accompanying guests can be booked for an additional charge. Detailed information and registration form can be found on our homepage www.isbm.at

Expectations of ISBM 2012	
What is my main interest in Past . Present . Futu	re?
Suggestions to the organizer (topic areas, possi	ible speakers, programme wishes)
I have read and duly noted the participation conditi	ons (www.isbm.at) and express my agreement hereto.
	l purposes from Konfliktkultur-Kulturkonflikt Patera 8 e without stating any reasons (please delete this line i
Place, date	Signature

You will receive confirmation of registration as well as your invoice via e-mail within 14 days. Your registration is valid once payment is transferred to our account.

Please send registration by fax, post or e-mail to:

- **⊠** Konfliktkultur-Kulturkonflikt Patera & Gamm OG, A-1190 Vienna, Salmannsdorferstr. 16/7
- ☐ Fax-No.: ++43 (0)1 440 51 21 38
- * office@konfliktkultur.com