

REGISTRATION FORM

CEPS Task Force: Anti-Money Laundering in the EU

Person attending the meetings			
Title:	First name:	Last name:	
Job title:			
E-mail:		Telephone:	
Company / Institution			
Company / Institution name:			
Postal address:			
	Postcode:	City:	Country:
Contact Person:			
E-mail:		Telephone:	
Billing information			
Tax register number (VAT for Europe):			
Your reference, Customer Purchase Order No. or Cost Code N:			
Department:			
Postal address:			
	Postcode:	City:	Country:
Contact person:			
CEPS Members – check the applicable fee (+21% VAT)			
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<input type="checkbox"/>	Full Fee EUR 5,000	<input type="checkbox"/>	My company is interested in becoming a CEPS Member*
Date:		Signature:	
Return to: Beatriz Pozo beatriz.pozo@ceps.eu +32 2 229 39 87 / <i>Centre for European Policy Studies / 1 Place du Congrès / 1000 Brussels / Belgium</i>			
More information: If you would like to become a member or need more information, please contact Karel Lannoo, CEPS CEO at klannoo@ceps.eu +32 2 229 3965 or Diana Musteata, Corporate Relations, CEPS at diana.musteata@ceps.eu or +32 2 229 39 34.			

*Discounted fees for this Task Force will be considered for non-members if they decide to become CEPS Members.