



**APPLIED REGULATORY IMPACT ANALYSIS  
TRAINING  
ROME, ITALY**

16-20 October 2017

**REGISTRATION FORM**

**PERSONAL DETAILS (Please ensure Name is provided as on passport if Visa Letter is needed):**

FIRST NAME: \_\_\_\_\_

FAMILY NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
MONTH (SPELLED OUT) DAY OF MONTH YEAR

PLACE OF BIRTH: \_\_\_\_\_

CITIZENSHIP: \_\_\_\_\_

COUNTRY OF RESIDENCE: \_\_\_\_\_

What visa documents do you need from us? (Letter of invitation, etc.). Please be specific, i.e., Does letter need to be faxed to consulate, etc.

\_\_\_\_\_

Important: WE MUST HAVE YOUR REQUEST FOR VISA DOCUMENTS SIX WEEKS BEFORE THE COURSE.

**CONTACT INFORMATION**

E-MAIL: \_\_\_\_\_

CONFIRM E-MAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

BUSINESS TITLE: \_\_\_\_\_

Kind of Work (please choose one of the following):

GOVERNMENT

ACADEMIC INSTITUTION

NGO

PRIVATE BUSINESS

OTHER:

### **ADDITIONAL INFO**

HOW DID YOU HEAR ABOUT THE COURSE? (PLEASE CHOOSE ONE OF THE FOLLOWING):

INTERNET ADVERTISING

RECOMMENDED BY SOMEONE WHO HAS ATTENDED PRIOR COURSE

ANNOUNCEMENT OR WEBSITE OF LUISS

ANNOUNCEMENT OR WEBSITE OF JACOBS AND ASSOCIATES

PRINT ADVERTISEMENT

OTHER

DIETARY RESTRICTIONS

### **PAYMENT**

The registration fee (including tuition, housing and meals, but not transport) is:

- 2.890 Euro for government and NGO officials from developing countries and emerging economies;
- 3.190 Euro for government and NGO officials from OECD countries;
- 3.700 Euro for private sector representative

## INVOICING INSTRUCTIONS:

---

---

---

---

Please pay by wire transfer to the Jacobs, Cordova & Associates Europe bank account:

*Account holder: Jacobs, Cordova & Associates Europe Limited  
Allied Irish Bank plc  
Bankcentre Branch  
Ballsbridge  
Dublin 4, Ireland  
Full account number: 01134043  
IBAN:IE29 AIBK 9313 6501 1340 43  
Bic Code: AIBKIE2D  
Sort Code: 93 13 65*

So we can track payments, please send us via email a proof of payment (a copy of the payment receipt, or a screenshot in case of the electronic payment).

Email: [janda@regulatoryreform.com](mailto:janda@regulatoryreform.com)

Receipt of this form shall be acknowledged and your registration shall be definite upon receipt of the payment.

**Payments are due 30 days prior to course commencement. Registration Deadline is 30 days prior to each course.**

Please ensure that the payment covers all wire transfer fees.

### **CANCELLATION POLICY:**

- \* Cancellations before the registration deadline will receive a full refund.
- \* Cancellations after the registration deadline will be charged 40% of the total fee, except that:
- \* Cancellations 10 or fewer days before the course shall be charged 60% of the fee

**We reserve to cancel the course within 20 days of the course date.**