

HFC WORKSHOP REGISTRATION FORM

Please return this form via e-mail to hfcs@bcl.lu by 15/06/2019 at the latest.

| Conference topic: Date: | 7th Household Finance and Consumption Workshop 20/06/2019 (11.00 – 18.00) |
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| Pagistration times | 21/06/2019 (09.00 – 15.00) 20/06/2019 from 10.20 onward (proof of identity required) |
| Registration time: | 21/06/2019 from 08.20 onward (proof of identity required) |
| Venue: | 43, Avenue Monterey, Luxembourg City |
| I will attend the workshop: | Thursday, 20 June YES NO |
| | Friday, 21 June YES NO |
| I will attend the dinner: | Thursday, 20 June YES NO |
| Dinner location: Restaurant "Apoteca Essenza", 12, rue de la Boucherie, L-1247 Luxembourg | |
| | |
| ☐ Ms ☐ Mr | Title: |
| First Name: | Last Name: |
| Function: | Institution: |
| Phone: | Fax: |
| Email: | |
| Other requirements (ex. dietary restrictions, etc.) | |
| Other requirements (ex. dietary restrictions, etc.) | |
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| CONSENT FORM | |
| I hereby,: [tick the correct box] | |
| do authorise do NOT authorise | |
| the Banque centrale du Luxembourg to publish photos and videos taken by the BCL – on which I am present and recognisable – on its intranet or internet website www.bcl.lu . | |
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| Signed on//2019, in | Signature |