

**Living With a Star Coordinated Data Analysis**  
**workshop: Do all CMEs have flux rope structure?**  
**Alcalá de Henares, Madrid**  
**September, 5-9, 2011**

**Workshop Secretariat**

General Foundation of the University of Alcalá  
 Department of Training and Congresses  
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**REGISTRATION FORM**

**Personal Details**

Family name: ..... First name: .....  
 Position ..... Department: .....  
 Institution: .....  
 Address: .....  
 Postal Code: ..... City: ..... Country: .....  
 Telephone: ..... Fax: ..... E-mail: .....

According to the Spanish Law on the protection of personal data (L.O. 15/99 Personal Data Protection), we inform you that the personal data you are providing will be used by the Dpto. of Training and Congresses of the General Foundation of the University of Alcalá, exclusively for the purposes related with the organization of this event. By filling this form, you authorize to the Dpto. of Training and Congresses of the General Foundation of the University of Alcalá to use the personal data you provided for the above mentioned purpose. If you wish to exercise yours rights to access, correct and cancel these data, please contact our office.

**NO Registration fees**

**Accommodation**

	Single room	Double room	Breakfast
<input type="checkbox"/> San Ildefonso Residence	45,42 €	45,42 €	Not Included
<input type="checkbox"/> Husa El Bedel Hotel***	85,00 €	85,00 €	Included
<input type="checkbox"/> Parador of Alcalá de Henares****	137,00 €	164,00 €	Included

Arrival date: ..... Departure date: .....

Number of nights: ..... Type of room: .....

The details of your credit card must be indicated below in order to guarantee the reservation. In case of cancellation after July 31<sup>st</sup> the first night will be charged.

**Payment**

- Bank transfer to: Account Owner: General Foundation of the University of Alcalá  
 Bank name: CAJA MADRID  
 Address: C/ Libreros 10. 28801. Alcalá de Henares (Madrid). Spain  
 Bank Account: 2038-2201-29-6000798915  
 Swift Code: CAHMESMMXXX  
 IBAN Code: ES38 2038 2201 2960 0079 8915
- By credit card: I duly authorise the GENERAL FOUNDATION OF THE UNIVERSITY OF ALCALÁ to charge on this credit card account the Total Amount due of Payment according to the information included in this form.

Credit card information:  VISA  MASTERCARD

Card Number: |\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_| |\_|\_|\_|\_|\_| Exp Date: \_\_\_\_\_

Cardholder's name: \_\_\_\_\_

Signature: \_\_\_\_\_

Send this completed form by: Fax to: +34 91 879 74 55 or by email: congresos@fgua.es  
 Mail to: General Foundation of the University of Alcalá.c/ Imagen, 1 – 3. 28801 Alcalá de Henares. MADRID.  
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