



51st International Eucharistic Congress

Appendix

(Official Registration Forms)



IEC 51st International Eucharistic Congress

Pope John Paul II Ave, Mabolo, Cebu City | Tel. No. +6332 260 - 3912
www.iec2016.ph | info@iec2016.ph | secretariat@iec2016.ph

To assist the Congress in minimizing cost, kindly register online through the Congress website www.iec2016.ph

SYMPOSIUM REGISTRATION FORM

JANUARY 20 - 22, 2016

Title: Mr. Mrs. Ms. Miss Sister Bro. Dr. Others _____

Family Name: _____

First Name: _____

Group Name: _____
(if applicable)

Address: _____

City: _____ Post Code: _____ Country: _____

Tel: _____ Mobile: _____

Email: _____

(All communication for booking confirmation will be through email only)

Age Range: 16-18 18-24 25-34 35-49 50-59 60-69 70 & up

Under 16 must be accompanied by an adult with the appropriate clearance from the required agency as necessary.

Gender: Female Male

Nationality: _____ Diocese: _____

Your contact details will be used by the Congress for attendance registration purposes. The National Delegate of your country will be given your contact details to assist in your country's plans to attend the Symposium. If you do not wish your contact details to be passed on to your National Delegate, please tick here. (✓)

FUTURE CONTACT

Would you like to be placed in the active contact file after the Symposium for continuing updates regarding future events?

Yes to Future Contact No to Future Contact

STUDENT/OCCUPATIONAL DATE

Are you a Student Non-student

Course/Year Level: _____ Occupation: _____

School: _____ Work Address: _____

School Address: _____

ACCESS REQUIREMENTS / SPECIAL NEEDS

Please let us know if you have any access requirements or special needs:

- Hearing Impaired or Deaf Wheelchair User Visually Impaired
 Mobility Assistance Required Without Speech

SYMPOSIUM LANGUAGE

The 10 official Symposium languages are listed below. Please indicate your preferred language.

- English Italian Thai Japanese Vietnamese
 Spanish French Portuguese Korean Chinese

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

- Filipino Sign Language British Sign Language
 American Sign Language Others _____

SYMPOSIUM REGISTRATION FEE

Please note that online registration is open up to January 18, 2016, after which registration will be available on-site only with increased fees.

FULL REGISTRATION - Registration fee covers access to all sessions and workshops.

Regular Rate: USD 100.00

VOLUNTARY SOLIDARITY CONTRIBUTION

We need the help of everyone so that poorer Pilgrims can register and attend the 51st International Eucharistic Congress 2016. All donations will be gratefully received.

Voluntary Contribution Amount: _____

ACCOMMODATION

There is a full list of accommodation options, descriptions and booking terms and conditions available on the website www.iec2016.ph.

SUMMARY

Registration Fee: _____

Voluntary Contribution: _____

TOTAL: _____

PAYMENT

Wire and bank transfer payable to:

Bank: Bank of the Philippine Islands (BPI)
Address: Cebu Mango Branch
 Gen. Maxilom Avenue, Cebu City, Philippines 6000
Account Number: For Peso: 1023-2656-36
 For USD: 1024-0466-44
 For Euro: 1024-0466-36
Swift Code: BOIPHMM

Note: All wire/bank transfer charges shall be paid by the delegate. If you wish to pay via credit card, please register online.

TERMS & CONDITIONS

IEC2016 Registration Terms & Conditions:

- Please note that your registration booking agreement is with the 51st International Eucharistic Congress (IEC2016) . Full payment is required for acceptance of registration. You must also supply an email address for confirmation purposes.
- All cancellations must be sent in writing to iecinquiry@iec2016.ph or faxed to +6332 260-3912. No cancellations will be accepted by telephone.
- Cancellations requiring a refund of payments will be subject to a USD 10 cancellation fee. Cancellations made after November 30, 2015 will not be refunded.
- The currency exchange rate to be applied in the case of payments and refunds will be based on the available exchange rate at the time of the transaction. IEC2016 is not responsible for any changes in exchange rates which may cause any difference or any other additional fees levied by your bank or card processor. Bank charges are the responsibility of the Pilgrim.

IEC2016 General Terms and Conditions:

- Any Pilgrim who is not wearing the official Symposium ID will not be allowed access to Symposium venues.
- IEC2016 reserves the right to alter any of the arrangements for this Symposium, including cancellation of the event should unforeseen circumstances require such action.
- IEC2016 accepts no responsibility for resulting costs and inconvenience to Pilgrims who are advised to have their own travel and health insurance in place.

IEC 2016 Accommodation Terms & Conditions:

Should you require accommodations, your accommodation booking agreement is made directly with the hotels. A full list of accommodation options and terms and conditions are available through the Congress website at www.iec2016.ph

Force Majeure

IEC2016 is freed from any liability or obligation under this contract for circumstances beyond its control, such as, but not limited to war, strike, riot, crime, or an event described by the legal term as an "act of God" (such as flooding, earthquake, or typhoon), which might prevent them from fulfilling their obligations under this contract.

Should any conflict arise between IEC2016 as the event host and organizer and the Pilgrim Delegate(s), both parties commit to reaching the best possible resolution of any situation or difficulty that may arise within the period of this event.

Please tick the box below:

I have read and accepted the Terms and Conditions surrounding this transaction.

Date: _____

Signature: _____



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SYMPOSIUM GROUP REGISTRATION FORM

JANUARY 20 - 22, 2016

For registrations of seven (7) or more people, please complete the Group Registration Form. For registrations of six (6) and below, please complete the Individual Registration Form. For registration of more than 10 delegates, kindly reproduce the first page.

Group Details (BLOCK CAPITALS PLEASE)

Group Name: _____

Reservation Company Name (if applicable): _____

Number of Pilgrims in Group: _____

Contact Person

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

Delegates

1. Last Name: _____ First Name: _____

2. Last Name: _____ First Name: _____

3. Last Name: _____ First Name: _____

4. Last Name: _____ First Name: _____

5. Last Name: _____ First Name: _____

6. Last Name: _____ First Name: _____

7. Last Name: _____ First Name: _____

8. Last Name: _____ First Name: _____

9. Last Name: _____ First Name: _____

10. Last Name: _____ First Name: _____

SYMPOSIUM LANGUAGE

The 10 official Symposium languages are listed below. Please indicate your preferred language.

- | | | | | |
|----------------------------------|----------------------------------|-------------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> English | <input type="checkbox"/> Italian | <input type="checkbox"/> Thai | <input type="checkbox"/> Japanese | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> French | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Korean | <input type="checkbox"/> Chinese |

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

- | | |
|---|--|
| <input type="checkbox"/> Filipino Sign Language | <input type="checkbox"/> British Sign Language |
| <input type="checkbox"/> American Sign Language | <input type="checkbox"/> Others _____ |

SYMPOSIUM REGISTRATION FEE

Please note that online registration is open up to January 18, 2016, after which registration will be available on-site only with increased fees.

FULL REGISTRATION - Registration fee covers access to all sessions and workshops.

Regular Rate: USD 100.00

VOLUNTARY SOLIDARITY CONTRIBUTION

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Voluntary Contribution Amount: _____

ACCOMMODATION

There is a full list of accommodation options, descriptions and booking terms and conditions available on the website www.iec2016.ph

SUMMARY

Registration Fee: _____

Voluntary Contribution: _____

TOTAL: _____

PAYMENT

Wire and bank transfer payable to:

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Address: Cebu Mango Branch
Gen. Maxilom Avenue, Cebu City, Philippines 6000
Account Number: For Peso: 1023-2656-36
For USD: 1024-0466-44
For Euro: 1024-0466-36
Swift Code: BOIPHMM

Note: All wire/bank transfer charges shall be paid by the delegate. If you wish to pay via credit card, please register online.

TERMS & CONDITIONS

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- All cancellations must be sent in writing to iecinquiry@iec2016.ph or faxed to +6332 260-3912. No cancellations will be accepted by telephone.
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- Any Early Registration booking must be paid in full upon registration or no later than two (2) weeks after the early registration closing date (June 30, 2015). If payment for Early Registration is not received by this date, the regular registration fee will apply.

IEC2016 General Terms and Conditions:

- Any Pilgrim who is not wearing the official Congress ID will not be allowed access to Symposium venues.
- IEC2016 reserves the right to alter any of the arrangements for this Congress, including cancellation of the event should unforeseen circumstances require such action.
- IEC2016 accepts no responsibility for resulting costs and inconvenience to Pilgrims who are advised to have their own travel and health insurance in place.

IEC 2016 Accommodation Terms & Conditions:

Should you require accommodations, your accommodation booking agreement is made directly with the hotels. A full list of accommodation options and terms and conditions are available through the Congress website at www.iec2016.ph

Force Majeure

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Should any conflict arise between IEC2016 as the event host and organizer and the Pilgrim Delegate(s), both parties commit to reaching the best possible resolution of any situation or difficulty that may arise within the period of this event.

Please tick the box below:

I have read and accepted the Terms and Conditions surrounding this transaction.

Date: _____

Signature: _____



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CLERGY REGISTRATION FORM

Title: Deacon Priest Arch/Bishop Cardinal

Family Name: _____

First Name: _____

Group Name: _____
(If applicable)

Address: _____

City: _____ Post Code: _____ Country: _____

Tel: _____ Mobile: _____

Email: _____
(All communication for booking confirmation will be through email only)

Age Range: Below 25 25-34 35-49 50-59 60-69 70 & up

Nationality: _____ Diocese: _____

Religious Congregation / Order / Society: _____

Your contact details will be used by the Congress for attendance registration purposes. The National Delegate of your country will be given your contact details to assist in your country's plans to attend the Congress. If you do not wish your contact details to be passed on to your National Delegate, please tick here. (✓)

FUTURE CONTACT

Would you like to be placed in the active contact file after the Congress for continuing updates regarding future events?

Yes to Future Contact No to Future Contact

AVAILABILITY FOR CONFESSIONS

Are you available for confessions during the Congress?

Yes If Yes, in what language? _____ No

DIETARY REQUIREMENTS

Do you have any Dietary Requirements? None

Vegetarian Vegan Lactose Intolerant Nut Allergy Gluten Intolerant

Others _____

ACCESS REQUIREMENTS / SPECIAL NEEDS

Please let us know if you have any access requirements or special needs:

- Hearing Impaired or Deaf Wheelchair User Visually Impaired
 Mobility Assistance Required Without Speech

CONGRESS LANGUAGE

The 10 official Congress languages are listed below. Please indicate your preferred language.

- English Italian Thai Japanese Vietnamese
 Spanish French Portuguese Korean Chinese

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

- Filipino Sign Language British Sign Language
 American Sign Language Others _____

VESTMENT MEASUREMENTS

Priest & deacons will be provided stoles at the Congress. They are requested to bring their own albs. Bishops, however, will be provided chasuble and mitre. They are requested to tick the relevant boxes below.

- Chasuble (length): Small (130-135cm) Medium (136-142cm) Large (143++ cm)
Mitre (diameter): Small (55-56cm) Medium (57-59cm) Large (60++ cm)

CONGRESS REGISTRATION FEES

Please note that online registration is open up to January 22, 2016, after which registration will be available on-site only with increased fees.

FULL REGISTRATION (January 24 - 31, 2016)

Registration fee covers:

1. Access to all sessions, workshops and exhibits
2. Access to all other Congress events such as church visits, concerts, and special Heritage Night
3. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
4. Special Pilgrim Pack
5. Lunch voucher (6 days)

Early Registration	USD 350.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 400.00	July 1, 2015 - November 30, 2015
Late Registration	USD 450.00	December 1, 2015 - January 22, 2016

4-DAY REGISTRATION (January 24 - 27 OR 28 - 31)

Registration fee covers:

1. Access to all events except Plenary & Concurrent sessions on days not covered by registration
2. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
3. Special Pilgrim Pack
4. Lunch voucher (3 days)

Early Registration	USD 175.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 200.00	July 1, 2015 - November 30, 2015
Late Registration	USD 225.00	December 1, 2015 - January 22, 2016

VOLUNTARY SOLIDARITY CONTRIBUTION

We need the help of everyone so that poorer Pilgrims can register and attend the 51st International Eucharistic Congress 2016. All donations will be gratefully received.

Voluntary Contribution Amount: _____

ACCOMMODATION

There is a full list of accommodation options, descriptions and booking terms and conditions available on the website www.iec2016.ph.

SUMMARY

Registration Fee: _____

Voluntary Contribution: _____

TOTAL: _____

PAYMENT

Wire and bank transfer payable to:

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Address: Cebu Mango Branch
Gen. Maxilom Avenue, Cebu City, Philippines 6000
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For USD: 1024-0466-44
For Euro: 1024-0466-36
Swift Code: BOIPPHMM

Note: All wire/bank transfer charges shall be paid by the delegate. If you wish to pay via credit card, please register online.

CERTIFICATION FOR CLERGY

Deacons and Priests must fill out the attached Certification for Clergy form and send the same to clergy@iec2016.ph or fax to +6332 260-3912.

Confirmation of this registration will be made upon receipt and validation of the Certification for Clergy by the IEC2016 General Secretariat.

TERMS & CONDITIONS

IEC2016 Registration Terms & Conditions:

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- All cancellations must be sent in writing to iecinquiry@iec2016.ph or faxed to +6332 260-3912. No cancellations will be accepted by telephone.
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Please tick the box below:

I have read and accepted the Terms and Conditions surrounding this transaction.

Date: _____

Signature: _____



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CLERGY CERTIFICATION

TO WHOM IT MAY CONCERN:

I hereby certify that (_____), a cleric of good standing, belonging to the (_____), is approved for celebrating the sacraments. He has incurred no censure and I permit him to attend the 51st International Eucharistic Congress in Cebu, the Philippines, from January 20-31, 2016.

Therefore, I recommend him to all the Most Rev. Ordinaries and to the Rectors of the Churches to the effect that he may offer the Holy Sacrifice of the Mass or to celebrate the other sacraments when necessary.

Given at the _____ on this _____ day of _____ in the year of Our Lord, Two Thousand and _____.

(Printed Name and Signature of Ordinary)

Contact Details of Ordinary:

Mailing Address: _____

Email Address: _____

Phone Number: _____

Fax Number: _____

Kindly send PDF of this document to
clergy@iec2016.ph or
Fax to +6332 260-3912



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GROUP CLERGY REGISTRATION FORM

For registrations of seven (7) or more people, please complete the Group Registration Form. For registrations of six (6) and below, please complete the Individual Registration Form. For registration of more than 10 delegates, kindly reproduce the first page.

All group members must have the same registration type, and if registering for four (4) days, they must choose the same four (4) days. It is possible to register a group and provide the group members' names at a later stage but all names must be provided before the Early Registration Deadline of June 30, 2015 to avail of the Early Registration Fee.

Group Details (BLOCK CAPITALS PLEASE)

Group Name: _____

Reservation Company Name (if applicable): _____

Contact Person

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

Availability for Confessions:

Kindly tick the box on the right hand side if the cleric is available for confessions during the Congress.

Delegates

1. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

2. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

3. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

4. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

5. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

6. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

7. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

8. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

9. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

10. (Deacon / Priest / Bishop): _____
LAST NAME FIRST NAME

CONGRESS LANGUAGE

The 10 official Congress languages are listed below. Please indicate your preferred language.

- English Italian Thai Japanese Vietnamese
 Spanish French Portuguese Korean Chinese

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

- Filipino Sign Language British Sign Language
 American Sign Language Others _____

VESTMENT MEASUREMENTS

Priest & deacons will be provided stoles at the Congress. They are requested to bring their own albs. Bishops, however, will be provided chasuble and mitre. If there are bishops within your group, kindly indicate their number on the corresponding measurements of chasuble and mitre below.

Chasuble (length): _____Small (130-135cm) _____Medium (136-142cm) _____Large (143++ cm)

Mitre (diameter): _____Small (55-56cm) _____Medium (57-59cm) _____Large (60++ cm)

MEDICAL CONDITIONS, DIETARY & ACCESS REQUIREMENTS

Group members with special medical, dietary and access requirements must individually fill out the attached form. (Clergy with special needs)

CERTIFICATION FOR CLERGY

Deacons and Priests must fill out the attached Certification for Clergy form and send the same to clergy@iec2016.ph or fax to +6332 260-3912.

This registration will not be confirmed until your certification is validated by the IEC2016 General Secretariat.

CONGRESS REGISTRATION FEES

Please note that online registration is open up to January 22, 2016, after which registration will be available on-site only with increased fees.

FULL REGISTRATION (January 24 - 31, 2016)

Registration fee covers:

1. Access to all sessions, workshops and exhibits
2. Access to all other Congress events such as church visits, concerts, and special Heritage Night
3. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
4. Special Pilgrim Pack
5. Lunch voucher (6 days)

Early Registration	USD 350.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 400.00	July 1, 2015 - November 30, 2015
Late Registration	USD 450.00	December 1, 2015 - January 22, 2016

4-DAY REGISTRATION (January 24 - 27 OR 28 - 31)

Registration fee covers:

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www.iec2016.ph | info@iec2016.ph | secretariat@iec2016.ph

CLERGY WITH SPECIAL NEEDS

Group Name: _____

Reservation Company Name (if applicable): _____

Number of Pilgrims in Group: _____

Name of Delegate

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

Contact Person

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

DIETARY REQUIREMENTS

Do you have any Dietary Requirements? None

Vegetarian Vegan Lactose Intolerant Nut Allergy Gluten Intolerant

Others _____

ACCESS REQUIREMENTS / SPECIAL NEEDS

Please let us know if you have any access requirements or special needs:

Hearing Impaired or Deaf Wheelchair User Visually Impaired

Mobility Assistance Required Without Speech



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To assist the Congress in minimizing cost, kindly register online through the Congress website www.iec2016.ph

PILGRIM REGISTRATION FORM

Title: Mr. Mrs. Ms. Miss Sister Bro. Dr. Others _____

Family Name: _____

First Name: _____

Group Name: _____
(if applicable)

Address: _____

City: _____ Post Code: _____ Country: _____

Tel: _____ Mobile: _____

Email: _____

(All communication for booking confirmation will be through email only)

Age Range: 16-18 18-24 25-34 35-49 50-59 60-69 70 & up

Under 16 must be accompanied by an adult with the appropriate clearance from the required agency as necessary.

Gender: Female Male

Nationality: _____ Diocese: _____

Your contact details will be used by the Congress for attendance registration purposes. The National Delegate of your country will be given your contact details to assist in your country's plans to attend the Congress. If you do not wish your contact details to be passed on to your National Delegate, please tick here. (√)

FUTURE CONTACT

Would you like to be placed in the active contact file after the Congress for continuing updates regarding future events?

Yes to Future Contact

No to Future Contact

DIETARY REQUIREMENTS

Do you have any Dietary Requirements? None

Vegetarian Vegan Lactose Intolerant Nut Allergy Gluten Intolerant

Others _____

ACCESS REQUIREMENTS / SPECIAL NEEDS

Please let us know if you have any access requirements or special needs:

Hearing Impaired or Deaf Wheelchair User Visually Impaired

Mobility Assistance Required Without Speech

CONGRESS LANGUAGE

The 10 official Congress languages are listed below. Please indicate your preferred language.

English Italian Thai Japanese Vietnamese

Spanish French Portuguese Korean Chinese

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

Filipino Sign Language British Sign Language

American Sign Language Others _____

CONGRESS REGISTRATION FEES

Please note that online registration is open up to January 22, 2016, after which registration will be available on-site only with increased fees.

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Registration fee covers:

1. Access to all sessions, workshops and exhibits
2. Access to all other Congress events such as church visits, concerts, and special Heritage Night
3. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
4. Special Pilgrim Pack
5. Lunch voucher (6 days)

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Regular Rate	USD 400.00	July 1, 2015 - November 30, 2015
Late Registration	USD 450.00	December 1, 2015 - January 22, 2016

4-DAY REGISTRATION (January 24 - 27 OR 28 - 31)

Registration fee covers:

1. Access to all events except Plenary & Concurrent sessions on days not covered by registration
2. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
3. Special Pilgrim Pack
4. Lunch voucher (3 days)

Early Registration	USD 175.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 200.00	July 1, 2015 - November 30, 2015
Late Registration	USD 225.00	December 1, 2015 - January 22, 2016

VOLUNTARY SOLIDARITY CONTRIBUTION

We need the help of everyone so that poorer Pilgrims can register and attend the 51st International Eucharistic Congress 2016. All donations will be gratefully received.

Voluntary Contribution Amount: _____

ACCOMMODATION

There is a full list of accommodation options, descriptions and booking terms and conditions available on the website www.iec2016.ph.

SUMMARY

Registration Fee: _____

Voluntary Contribution: _____

TOTAL: _____

PAYMENT

Wire and bank transfer payable to:

Bank: Bank of the Philippine Islands (BPI)
Address: Cebu Mango Branch
Gen. Maxilom Avenue, Cebu City, Philippines 6000
Account Number: For Peso: 1023-2656-36
For USD: 1024-0466-44
For Euro: 1024-0466-36
Swift Code: BOIPHMM

Note: All wire/bank transfer charges shall be paid by the delegate. If you wish to pay via credit card, please register online.

TERMS & CONDITIONS

IEC2016 Registration Terms & Conditions:

- Please note that your registration booking agreement is with the 51st International Eucharistic Congress (IEC2016) . Full payment is required for acceptance of registration. You must also supply an email address for confirmation purposes.
- All cancellations must be sent in writing to iecinquiry@iec2016.ph or faxed to +6332 260-3912. No cancellations will be accepted by telephone.
- Cancellations requiring a refund of payments will be subject to a USD 50. cancellation fee. Cancellations made after November 30, 2015 will not be refunded.
- The currency exchange rate to be applied in the case of payments and refunds will be based on the available exchange rate at the time of the transaction. IEC2016 is not responsible for any changes in exchange rates which may cause any difference or any other additional fees levied by your bank or card processor. Bank charges are the responsibility of the Pilgrim.
- Any Early Registration booking must be paid in full upon registration or no later than two (2) weeks after the early registration closing date (June 30, 2015). If payment for Early Registration is not received by this date, the regular registration fee will apply.

IEC2016 General Terms and Conditions:

- Any Pilgrim who is not wearing the official Congress ID will not be allowed access to Congress venues.
- IEC2016 reserves the right to alter any of the arrangements for this Congress, including cancellation of the event should unforeseen circumstances require such action.
- IEC2016 accepts no responsibility for resulting costs and inconvenience to Pilgrims who are advised to have their own travel and health insurance in place.

IEC 2016 Accommodation Terms & Conditions:

Should you require accommodations, your accommodation booking agreement is made directly with the hotels. A full list of accommodation options and terms and conditions are available through the Congress website at www.iec2016.ph

Force Majeure

IEC2016 is freed from any liability or obligation under this contract for circumstances beyond its control, such as, but not limited to war, strike, riot, crime, or an event described by the legal term as an "act of God" (such as flooding, earthquake, or typhoon), which might prevent them from fulfilling their obligations under this contract.

Should any conflict arise between IEC2016 as the event host and organizer and the Pilgrim Delegate(s), both parties commit to reaching the best possible resolution of any situation or difficulty that may arise within the period of this event.

Please tick the box below:

I have read and accepted the Terms and Conditions surrounding this transaction.

Date: _____

Signature: _____



IEC 51st International Eucharistic Congress

Pope John Paul II Ave, MaboLo, Cebu City | Tel. No. +6332 260 - 3912
www.iec2016.ph | info@iec2016.ph | secretariat@iec2016.ph

To assist the Congress in minimizing cost, kindly register online through the Congress website www.iec2016.ph

GROUP PILGRIM REGISTRATION FORM

For registrations of seven (7) or more people, please complete the Group Registration Form. For registrations of six (6) and below, please complete the Individual Registration Form. For registration of more than 10 delegates, kindly reproduce the first page.

All group members must have the same registration type, and if registering for four (4) days, they must choose the same four (4) days. It is possible to register a group and provide the group members' names at a later stage but all names must be provided before the Early Registration Deadline of June 30, 2015 to avail of the Early Registration Fee.

Group Details (BLOCK CAPITALS PLEASE)

Group Name: _____

Reservation Company Name (if applicable): _____

Number of Pilgrims in Group: _____

Contact Person

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

Delegates

1. Last Name: _____ First Name: _____

2. Last Name: _____ First Name: _____

3. Last Name: _____ First Name: _____

4. Last Name: _____ First Name: _____

5. Last Name: _____ First Name: _____

6. Last Name: _____ First Name: _____

7. Last Name: _____ First Name: _____

8. Last Name: _____ First Name: _____

9. Last Name: _____ First Name: _____

10. Last Name: _____ First Name: _____

CONGRESS LANGUAGE

The 10 official Congress languages are listed below. Please indicate your preferred language.

- English Italian Thai Japanese Vietnamese
 Spanish French Portuguese Korean Chinese

SIGN LANGUAGE

If you require sign language, please select the sign language you prefer:

- Filipino Sign Language British Sign Language
 American Sign Language Others _____

MEDICAL CONDITIONS, DIETARY & ACCESS REQUIREMENTS

Group members with special medical, dietary and access requirements must individually fill out the attached form.

CONGRESS REGISTRATION FEES

Please note that online registration is open up to January 22, 2016, after which registration will be available on-site only with increased fees.

FULL REGISTRATION (January 24 - 31, 2016)

Registration fee covers:

1. Access to all sessions, workshops and exhibits
2. Access to all other Congress events such as church visits, concerts, and special Heritage Night
3. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
4. Special Pilgrim Pack
5. Lunch voucher (6 days)

Early Registration	USD 350.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 400.00	July 1, 2015 - November 30, 2015
Late Registration	USD 450.00	December 1, 2015 - January 22, 2016

4-DAY REGISTRATION (January 24 - 27 OR 28 - 31)

Registration fee covers:

1. Access to all events except Plenary & Concurrent sessions on days not covered by registration
2. Transportation to / from Congress venues with established pick-up points on the official transport carousel route
3. Special Pilgrim Pack
4. Lunch voucher (3 days)

Early Registration	USD 175.00	September 1, 2014 - June 30, 2015
Regular Rate	USD 200.00	July 1, 2015 - November 30, 2015
Late Registration	USD 225.00	December 1, 2015 - January 22, 2016

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SUMMARY

Registration Fee: _____

Voluntary Contribution: _____

TOTAL: _____

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Date: _____

Signature: _____



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PILGRIM WITH SPECIAL NEEDS

Group Name: _____

Reservation Company Name (if applicable): _____

Name of Delegate

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

Contact Person

Last Name: _____ First Name: _____

Address: _____

Telephone: _____ Email: _____

DIETARY REQUIREMENTS

Do you have any Dietary Requirements? None

Vegetarian Vegan Lactose Intolerant Nut Allergy Gluten Intolerant

Others _____

ACCESS REQUIREMENTS / SPECIAL NEEDS

Please let us know if you have any access requirements or special needs:

Hearing Impaired or Deaf Wheelchair User Visually Impaired

Mobility Assistance Required Without Speech