

Course Name:	4 & 1/2 days SmartLab	Training					
Sessions:							
Location:	Rigaku Europe SE, Euro	Rigaku Europe SE, European Center of Expertise,					
	Hugenottenallee 167, 63	Hugenottenallee 167, 63263 Neu-Isenburg, Germany					
ATTENDEE INFORMATIO	N						
Title:	First name:						
Family name:							
Company name:							
Job title:							
Postal address (optional	al):						
Tel:	Fax:	Mobile:					
E-mail:							
Company VAT ID Number (only EU countries)							
EEA Representative of	f Data GDPR Privac	GDPR Privacy Notice					
Controller Rigaku Europe SE Hugenottenallee 167 63263 Neu Isenburg, Germ Tel: +49 6102 77 999 51 Email: rese@rigaku.com	under the Gene other laws. Our	When contacting us and submitting personal data to us, you may have certain rights under the General Data Protection Regulation (GDPR) of the European Union and other laws. Our privacy policy is outlined here: rigaku.com/en/privacy					
☐ I have read and agreed	to all the conditions of enrollment and	d payment as stipulated in this registration form.					
Attendee Name, Surname		Place, Date					

## Please mail this form to ECOE@rigaku.com

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## **HOW TO ENROL**

- Complete the registration form and send via E-mail through to ECOE@rigaku.com, acknowledgement will be e-mailed back to you.
- Form to be completed by each attendee.

## **CONDITIONS OF REGISTRATION**

- Cancellations are accepted in writing up to 14 days prior to the start of the training.
- In case of insufficient delegates for the training, Rigaku Europe SE may cancel this course. In this case, registered delegates will be notified.
- For price information please contact <a href="ECOE@rigaku.com">ECOE@rigaku.com</a>
- Fees for the Training Classes include participation in Training Class, the Course Material.
- The number of places is limited.

Comments:			