TEL: +30210 9956955, +30210 7277545, +30210 7277548 FAX: +30210 9923281, +30210 7248979

website: http://www.iagp.gr E-mail: kboud714@ppp.uoa.gr

22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

PARTICIPATION FORM No. 1 (To be submitted by 15th February 2010 or earlier)

FIRST NAME:	
SURNAME (Mr., Mrs., Ms):	
TITLE (Prof., Dr., M. Phil., M.A.):	
POSITION OR OCCUPATION :	
INSTITUTION (TEACHING OR RESEARCH):	
ADDRESS:	
WORK:	
HOME :	
TELEPHONE:	
WORK:	FAX:
HOME :	FAX:
E. MAIL:	
WORK :	
HOME :	
I WISH TO TAKE PART IN THE CONFERI	ENCE
a. AS A SPEAKER	
TITLE OF PAPER:	
b. AS AN ACCOMPANYING PERSON	
c. AS A PERSON ATTENDING THE CONFER	ENCE
DATE:	
SIGNATUDE	

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22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

PARTICIPATION FORM No. 1A

(For Invited Speakers only)
(To be submitted by 15th February 2010 or earlier)

FIRST NAME:
SURNAME (Mr., Mrs., Ms):
TITLE (Prof., Dr., M. Phil., M.A.):
POSITION OR OCCUPATION :
INSTITUTION (TEACHING OR RESEARCH) :
ADDRESS:
WORK:
HOME :
TELEPHONE:
WORK:FAX:
HOME:FAX:
E-MAIL:
WORK :
НОМЕ :
I WISH TO TAKE PART IN THE CONFERENCE AS AN INVITED SPEAKER
TITLE OF PAPER:
DATE:
SIGNATURE:

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22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

PARTICIPATION FORM No. 2 (To be submitted by 28th February 2010 or earlier)

TELEPHONE :	
WORK:	FAX:
HOME:	FAX:
E-MAIL :	
WORK:	HOME:
I am sendir	ng the text of the Abstract of my Paper
DATE :	
CICNA TUDE	

PARTICIPATION FORM No. 3

(To be submitted by 30th April 2010 or earlier)

NAME :		
TELEPHONE:		
WORK:	FAX:	
HOME:	FAX:	
E. MAIL:		
WORK:	НОМЕ:	
 I enclose a [non refu a. Before 1st of May 2 I enclose a [non refu a. Before 1st of May 2 I enclose a [non ref a.Before 1st of May 2 I enclose a [non refu 	nitted PARTICIPATION FORMS No 1, No 2 and the Abstract of my Paper. dable] deposit as payment for participation in the Conference as a Participation: 100.00 euros. b. After 1 st of May 2010: 120.00 euros dable] deposit for participation as accompanying or attending person: 10: 80.00 euros. b. After 1 st of May 2010: 100.00 euros dable] deposit for participation as a student or post-graduate student: 10: 80.00 euros. b. After 1 st of May 2010: 100.00 euros dable] deposit for participation as a secondary school student: 10: 60.00 euros. b. After 1 st of May 2010: 80.00 euros.	
should be on the name II. Participants who red (by Fax or e-mail as Pl Bank charges for remita. Orders and check 22nd ICOP- K. Best 5 Simonidou Str., 174 56 Alimos GREECE b. Bank account paccount number: 151/622563-23. IBAN	pay the equivalent amount in dollars. Cheques or orders in euros or in dollar f K. Boudouris and drawn correspondingly on a European Bank or a US Bait their payment through Bank account should send a copy of their receipt F) together with the present form completed to the Conference Secretariat. Indee must be paid by the participant. Ques should be made payable to: Addouris Accounts for participation fees should be made to the following National Bank of Greece, Konstantinos Boudouris-22nd ICOP, BANK-BRACCOUNT: GR 1501101510000015162256323, Swift Code (BIC): ETHNOmittance must be paid by the participant.	ng ANCH:
DATE :	SIGNATURE :	

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website: http://www.iagp.gr E-mail: kboud714@ppp.uoa.gr

22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

NAME	:
	ESS:
	HONE:
a. in recei b.	L:
	NAME :
	TELEPHONE : FAX :E-MAIL.
	NAME :POSITION or OCCUPATION :
	INSTITUTION (TEACHING or RESEARCH) :
	DATE:
	SIGNATURE:

FORM No. 5

GUIDELINES FOR WRITING THE ABSTRACT OR THE PAPER

- 1. Name (block letters) to be written top left.
- 2. Title of Paper (block letters) to be centered.
- 3. Text follows.
- 4. Name, title, position, institution (block letters) to be written at end, bottom right (following text, bibliography and notes).
- 5. Bibliography to come immediately after the main text of the Paper.
- 6. References and notes accompanying the text to be marked using continuous numbering and written on separate sheets numbered as a continuation of the pages of text (and notes).
- 7. Capitals to be used only when required by the rules of grammar.
- 8. Titles of books and periodicals must be printed in italics.
- 9. Titles of articles in periodicals or in collective volumes to be placed in inverted commas.
- 10. Abstract or Paper to be written on Personal Computer (**preferably Apple**) on 3.5 diskette and on MS Word 2000 and up with fonts Times New Roman. The diskette should be sent together with a printed copy of the Abstract or the Paper by post to the Secretariat. Alternatively the Abstract can be sent by e-mail as attachment as Word document and in PDF format.

EXAMPLE

THOMAS M. ROBINSON

THE PYTHAGOREAN WAY OF LIFE

Text.									 					
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T. M. ROBINSON PROFESSOR OF PHILOSOPHY DEPARTMENT OF PHILOSOPHY UNIVERSITY OF TORONTO

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website: http://www.iagp.gr E-mail: kboud714@ppp.uoa.gr

22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

FORM No. 6 {BOOK EXHIBITION}

I am sending these books of mine in order that they may be displayed and sold at the BOOK EXHIBITION during the course of the **22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY.**

(Books should be sent directly to the **Manager* of Elite City Resort** or brought by the author himself and given to the Secretary of the IAGP at Conference venue).

AUTHOR:

1. BOOK TITLE:
No OF COPIES:
PRICE IN USA DOLLAR OR EURO:
DISCOUNT:
2. BOOK TITLE:
No OF COPIES:
PRICE IN USA DOLLAR OR EURO:
DISCOUNT:
3. BOOK TITLE:
No OF COPIES:
PRICE IN USA DOLLAR OR EURO:
DISCOUNT:
4. BOOK TITLE:
No OF COPIES:
PRICE IN USA DOLLAR OR EURO:
DISCOUNT:
DATE:
SIGNATURE:

^{*} Postal address: Mr Georgios Koutiva, Manager of ELITE CITY RESORT, 2, Navarinou street, 24100 Kalamata - Greece, tel. +30 27210 22434, fax: +30 27210 84369, e-mail: info@elite.com.gr, website: www.elite.com.gr).

TEL: +30210 9956955, +30210 7277545, +30210 7277548 FAX: +30210 9923281, +30210 7248979

website: http://www.iagp.gr E-mail: kboud714@ppp.uoa.gr

22nd INTERNATIONAL CONFERENCE OF PHILOSOPHY

TRAVEL FORM No. 7

(To be submitted by 15th June 2010 or earlier)

NAME :
TITLE - POSITION :
ADDRESS:
TELEPHONE :FAX OR E-MAIL :
Please find bellow details of my trip to KALAMATA-MESSINIA:
1. BY SHUTTLE BUS (KTEL)
a. date of arrival:
b. departure from :b. departure from :
c. time of arrival:
2. BY FLIGHT (OLYMPIC AIR, AEGEAN AIRLINE, OR SKY EXPRESS OR AN OTHER AIRLINE):
a. date of arrival:
b. flight number:b. flight number:
c. time of arrival:
1. The participants should arrange travel details themselves and make sure they book their transportation in time.
2. The Travel Form should be completed by everyone taking part or attending the Conference who has previously submitted
the Participation Form.
3. The Form may be sent by ordinary mail, or by Fax, or by E-mail in a PDF format.
DATE:SIGNATURE

TRAVEL INFORMATION

1. There is a bus connection of Kalamata with Athens, Thessaloniki, Ioannina and Tirana. The departure from Athens to Kalamata is at the Athens Central Bus Terminal for Peloponnese (KTEL of Peloponnesos) in Kifissos (info: +30 210 5124910-11 and +30 210 5134293, Ticket issuing office: +30 210 5233810 {up to 5p.m.}). The Central Bus Terminal of Messinia in Kalamata is at: 23, Aristomenous Str. Kalamata, info: +30 27210 27172. From the Central Bus Terminal of Messinia to ELITE CITY RESORT you may get a taxi (price approx. €8.00 euros) or the local town bus No. 1 which departs from the street just across the Central Bus Terminal of Messinia and you should ask for the stop: "ELITE HOTEL." From Athens to Kalamata (and vice-versa) there are a number of departures and some of them are of express service. The duration of travelling time by EXPRESS SERVICE BUS is approx. 3hours and 15′ minutes and the ticket's price is approx. €20.00 euros. Express departures from Athens are at: 10.30, 13.00, 16.30 and 19.00.

The Athens Airport "Elefterios Venizelos" is linked to Athens Central Bus Terminal of Peloponnese in Kifisos with the Bus Line X93. Departures: every 30 minutes (info: $+30\ 210\ 5151582$).

2. Kalamata is connected by air with Athens, Thessaloniki and Heraklio of Crete with flights of Olympic Air, Aegean Airlines, and Sky Express. From Kalamata Airport to ELITE CITY RESORT you may get a taxi. The distance is 13klm, duration 15 minutes, and the taxi costs approx. €17.00 euros.

ACCOMMODATION FORM No. 8

ELITI	E CITY	RESORT	

NAME:
TITLE - POSITION:
ADDRESS:
TELEPHONE :E-mail
I have submitted application forms No. 1, 2 & 3 and paid the conference fee to the Organising Committee. I pay the amount of 200 Euros net for accommodation deposit by
Please mark with X the nights of stay: 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26
1. a. Payments for accommodation can be made by cheque or bank order in Euros. Cheques or order in euros or in dollars should be on the name of K. Boudouris and drawn correspondingly on European Bank or a US Bank. So, orders and cheques should be made payable to: 22nd ICOP-K Boudouris, 5 Simonidou Str.,174 56 Alimos, GREECE. b. Bank account payments for accommodation deposit should be made to the following accoun number: {National Bank of Greece, Konstantinos Boudouris-22nd ICOP, BANK-BRANCH: 151/622563-23. IBAN ACCOUNT: GR 1501101510000015162256323, Swift Code (BIC): ETHNGRAA}. All Bank charges for remittance must be paid by the participant. The accommodation form and the bank extract for the deposit can be sent to the Secretariat of the Conference by post or fax (+30 2109923281) or by e-mail: (kboud714@ppp.uoa.gr) as PDI format. 2. THE PRICES FOR CONFERENCE PARTICIPANTS AT ELITE CITY RESORT* ARE AS FOLLOWS: a. Sea View - Single room B+B: € 90
- Shigle fooli B+B. € 90 - Double room B+B: €110 - Three bed room B+B: €130 - Four bed room (Studio) B+B: €145 b. Garden – Mountain View - Single room B+B: € 80 - Double room B+B: €100 - Three bed room (Studio) B+B: €145 c. Cost of a lunch or dinner meal: € 18.00 euros per person. *Please note that the above prices for conference participants are also valid for a period of 3-6 days before an after the conference. Participants who arrange their own accommodation are requested to send the Travel Forn together with their Hotel Accommodation Form to the Secretariat of the Conference Organising Committee. Date: Signature:

* Situated by the sea and at the foot of *Taygetos* Mountain, the Elite City Resort is a **4 star hotel near Kalamata** City Centre. With the whole of the Messinian Bay to explore, you will be able to find plenty of great beaches for sunbathing and swimming, including the one belonging to the Elite City Resort Hotel itself. Kalamata International Airport and Kalamata Port are also within easy driving distance from the hotel (approx. 4klm).

FORM No. 9

(To be submitted by 15th June 2010 or earlier)

CONFERENCE BEACH PARTY (OR A GREEK EVENING ENTERTAINMENT)

(Participation Fee per person: 30 Euros) NAME: ADDRESS: TELEPHONE: FAX: E-MAIL: MOBILE PHONE: PERSONS: a. I send you a cheque of 30 Euros net on the name of K. Boudouris (drawn on a European Bank) as fees for participating in conference beach party. b. I pay the fees for participating in conference beach party through the indicated Bank account. Bank account payments for the above services should be made to the following account number: {National Bank of Greece, Konstantinos Boudouris-22nd ICOP, BANK-BRANCH: 151/622563-23. IBAN ACCOUNT:GR 1501101510000015162256323,Swift Code (BIC):ETHNGRAA} All Bank charges for remittance must be paid by the participant. The Beach Party Form No.10 and the bank extract for the relevant fees should be sent to the Secretariat of the Conference by post or fax (+30210-9923281) or by e-mail: kboud714@ppp.uoa.gr as PDF format. DATE:

SIGNATURE:

FORM No. 10 (To be submitted by 15th June 2010 or earlier)

CONFERENCE GALA DINNER

(40 EUROS PER PERSON)

NAME:
ADDRESS:
TELEPHONE:
FAX:
E-MAIL:
MOBILE PHONE:
PERSONS:
a. I send you a cheque of 40 Euros on the name of K. Boudouris
(drawn on a European Bank) as fees for participating in conference GALA DINNER.
b. I pay the fees for participating in conference GALA DINNER through the indicated Bank account. Bank account payments for the above services should be made to the following account number:
{National Bank of Greece, Konstantinos Boudouris-20th ICOP, BANK-BRANCH:
151/622563-23. IBAN ACCOUNT: GR 1501101510000015162256323, Swift Code (BIC):
ETHNGRAA }.
All Bank charges for remittance must be paid by the participant.
The Gala Dinner Form No. 11 and the bank extract of the relevant fees should be sent to the Secretariat of the Conference by post or fax (+30210-9923281) or by e-mail: kboud714@ppp.uoa.gr as PDF format.
DATE :
SIGNATURE ·

FORM No. 11 ONE DAY EXCURSION (To be submitted by 15 June 2010 or earlier)

(Participation Fee per person: 30 Euros)

- 1. Excursion takes a full day.
- 2. Departure from **ELITE CITY RESORT** at 8.30. Return to Hotel at 19.00.
- 3. It will include visits to ARCHAEOLOGICAL SITES AND OTHER WORTH VISITING PLACES OF MESSINIA and a stop for lunch and swimming (participants should remember to bring along their swimming gears).
- 4. Those wishing to go on excursion are kindly requested to complete the Form and send it to the Secretariat of the Conference by 15 June 2010 or earlier.

PARTICIPATION FORM No 12

ONE DAY EXCURSION

NAME AND SURNAME:
ADDRESS:
NUMBER OF PERSONS:
DATE:
SIGNATURE:

- a. I send you a cheque of 30 Euros on the name of K. Boudouris (drawn on a European Bank) as fees for participating in the Excursion.
- b. I pay the fees for participating in the Excursion through the indicated Bank account. Bank account payments for the above services should be made to the following account number:

{National Bank of Greece, Konstantinos Boudouris-20th ICOP, BANK-BRANCH: 151/622563-23. IBAN ACCOUNT: GR 1501101510000015162256323, Swift Code (BIC): ETHNGRAA}.

The participation form no 11 and the bank extract of the relevant fees should be sent to the Secretariat of the Conference by post or fax (+30210-9923281) or by e-mail: kboud714@ppp.uoa.gr in PDF format.

All Bank charges for remittance must be paid by the participant.