

**INTERNATIONAL ASSOCIATION FOR GREEK PHILOSOPHY**

5, SIMONIDOU STR., 174 56 ALIMOS – GREECE

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

Website: <http://www.hri.org/iagp>, <http://www.iagp.gr> E-mail: [kboud714@ppp.uoa.gr](mailto:kboud714@ppp.uoa.gr)

**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY  
ON THE TOPIC:  
« PHILOSOPHY, ART AND TECHNOLOGY »**

**PARTICIPATION FORM No. 1**

**(To be submitted by 30th December 2008 or 30th January 2009)**

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 :**

HOME : .....

WORK : .....

**I WISH TO TAKE PART IN THE CONFERENCE**

a. AS A SPEAKER

TITLE OF PAPER:.....

.....

b. AS AN ACCOMPANYING PERSON

c. AS A PERSON ATTENDING THE CONFERENCE

DATE:.....

SIGNATURE:.....

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**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY  
ON THE TOPIC:  
« PHILOSOPHY, ART AND TECHNOLOGY »**

**PARTICIPATION FORM No. 1A**

**(For Invited Speakers only)**

**(To be submitted by 30th December 2009 or 30th January 2009)**

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 :**

HOME : .....

WORK : .....

**I WISH TO TAKE PART IN THE CONFERENCE AS AN INVITED SPEAKER**

TITLE OF PAPER:.....

.....

.....

DATE:.....

SIGNATURE:.....

**INTERNATIONAL ASSOCIATION FOR GREEK PHILOSOPHY**

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**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY**

**PARTICIPATION FORM No. 2**  
**(To be submitted by 29th February 2009)**

NAME : .....

ADDRESS : .....

.....

TELEPHONE :

HOME ..... FAX: .....

WORK ..... FAX: .....

E. MAIL :

WORK ..... HOME .....

**I am sending the text of the Abstract of my Paper**

DATE : .....

SIGNATURE : .....

# 21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

## PARTICIPATION FORM No. 3

(To be submitted by the 30th of April 2009 or earlier)

NAME : .....

ADDRESS : .....

TELEPHONE :

HOME ..... FAX: .....

WORK ..... FAX: .....

E. MAIL :

WORK ..... HOME .....

I have already submitted PARTICIPATION FORMS No 1, No 2 and the Abstract of my Paper.

1. I enclose a [non refundable] deposit as payment for participation in the Conference as a Participant:

**a. Before 1<sup>st</sup> of May 2009: 100.00 euros. b. After 1<sup>st</sup> of May 2009: 120.00 euros**

2. I enclose a [non refundable] deposit for participation as accompanying or attending person:

**a. Before 1<sup>st</sup> of May 2009: 80.00 euros. b. After 1<sup>st</sup> of May 2009: 100.00 euros**

3. I enclose a [non refundable] deposit for participation as a student or post-graduate student:

**a. Before 1<sup>st</sup> of May 2009: 80.00 euros. b. After 1<sup>st</sup> of May 2009: 100.00 euros**

4. I enclose a [non refundable] deposit for participation as a secondary school student:

**a. Before 1<sup>st</sup> of May 2009: 60.00 euros. b. After 1<sup>st</sup> of May 2009: 80.00 euros.**

I. Participants may also pay the equivalent amount in dollars. Cheques or orders in euros or in dollars should be on the name of K. Boudouris and drawn correspondingly on a European Bank or a US Bank.

II. Participants who remit their payment through Bank account should send a copy of their receipt (by Fax or e-mail as PDF) together with the present form completed to the Conference Secretariat.

Bank charges for remittance must be paid by the participant

**a. Orders and cheques should be made payable to:**

**21st ICOP- K. Boudouris**

**5 Simonidou Str.,**

**174 56 Alimos**

**GREECE**

**b. Bank account payments for participation fees should be made to the following**

**account number:** {National Bank of Greece, K. Boudouris-21st 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.**

DATE : ..... SIGNATURE : .....

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**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY  
FORM No. 4**

**(To be submitted by 30 January 2009)**

NAME : .....

ADDRESS : .....

TELEPHONE : .....

FAX : .....

E-MAIL : .....

a. I list below the names of scholars working in the field that I think would be interested in receiving the First Circular and in attending the Conference or presenting a paper:

b. I wish to propose the following persons for the *Honorary Academic Committee* of the 21st INTERNATIONAL CONFERENCE OF PHILOSOPHY.

a. NAME : .....

TITLE : .....

POSITION or OCCUPATION : .....

.....

INSTITUTION ( TEACHING or RESEARCH ) : .....

.....

ADDRESS : .....

TELEPHONE : .....

FAX : .....

E-MAIL.....

b. NAME : .....

TITLE : .....

POSITION or OCCUPATION : .....

.....

INSTITUTION ( TEACHING or RESEARCH ) : .....

.....

ADDRESS : .....

TELEPHONE : .....

FAX : .....

E-MAIL.....

DATE : .....

SIGNATURE : .....

**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY**

**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 .....

.....

.....

.....

.....

.....

.....

.....

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

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1st 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 **21st INTERNATIONAL CONFERENCE OF PHILOSOPHY .**

(Books should be sent directly to the **Manager\*** of Coral Beach Hotel 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:.....

3.BOOK TITLE:.....

No OF COPIES: .....

PRICE IN USA DOLLAR OR EURO:.....

4.BOOK TITLE:.....

No OF COPIES: .....

PRICE IN USA DOLLAR OR EURO:.....

DATE:.....

SIGNATURE:.....

(\*Andreas Mylonas,Senior Sales Manager,Coral Bay,P.O.Box 62422,  
8099 Paphos Cyprus- Direct Line: +357 26 881 252, Fax: +357 26 621  
900,Mobile: +357 99 470 733, E-mail:andreas.mylonas@coral.com.cy )

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21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

### TRAVEL FORM No. 7

(To be submitted to the Organising Committee by 30th of JUNE 2009 or earlier)

NAME : .....

TITLE - POSITION : .....

ADDRESS : .....

TELEPHONE : .....FAX OR E-MAIL:.....

**Please find below details of my trip to CYPRUS:**

1. BY CA, O.A. OR OTHER

a. date of arrival ( PAPHOS or PAFOS): ..... a. date of departure: .....

b. flight number : .....b. flight number : .....

c. time of arrival : ..... c. time of departure: .....

2. BY CA, O.A. OR OTHER

a. date of arrival ( LARNACA): ..... a. date of departure: .....

b. flight number : .....b. flight number : .....

c. time of arrival : ..... c. time of departure: .....

2. By CHARTER FLIGHT

a. date of arrival ( PAPHOS or PAFOS): ..... a. date of departure: .....

b. flight number : .....b. flight number : .....

c. time of arrival : ..... c. time of departure: .....

Date.....Signature.....

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 .



# 21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

## ACCOMMODATION FORM No. 8 (IN CORAL BEACH HOTEL AND RESORT)

<http://www.coral.com.cy>

NAME : .....

TITLE - POSITION : .....

ADDRESS : .....

TELEPHONE : .....FAX: .....E-MAIL:

I have submitted application forms no 1, 2 & 3 and paid the conference fee

I wish to book a room..... (1, 2, 3 beds)

IN CORAL BEACH HOTEL AND RESORT (mark with X) :

15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 26, 27, 28, 29, 30, 31,

a. I send you a cheque of 200 Euros net on the name of K. Boudouris  
(drawn on a European Bank) as a deposit for accommodation  
( which is non-refundable).

a. Payments for accommodation can be made by cheque or bank order in Euros. Cheques or orders in euros or in dollars should be on the name of K. Boudouris and drawn correspondingly on a European Bank or a US Bank. So, orders and cheques should be made payable to: 21st ICOP-K. Boudouris, 5 Simonidou Str.,174 56 Alimos, GREECE.

b. Bank account payments for accommodation deposit should be made to the following account number : { National Bank of Greece, K. Boudouris-21st 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 (+30210-9923281) or by e-mail: ([kboud714@ppp.uoa.gr](mailto:kboud714@ppp.uoa.gr)) as PDF format.

### PRICES IN CORAL BEACH HOTEL AND RESORT

THE CONFERENCE WILL TAKE PLACE IN CORAL BEACH HOTEL AND RESORT WHICH IS A FIVE STARS LUXURY HOTEL, SITUATED IN A PERFECT AND PEACEFUL ENVIRONMENT, IDEAL FOR CONFERENCES AND VACATIONS. THE PRICES IN CORAL BEACH HOTEL AND RESORT ARE VERY HIGH, BUT SPECIAL ARRANGEMENTS HAVE BEING MADE FOR THE CONFERENCE PARTICIPANTS ONLY (A REDUCTION OF 60% OF THE NORMAL PRICE OFFERED TO THE CONFERENCE) THANKS TO THE NEAPOLIS UNIVERSITY OF PAFOS (NUP) MEDIATION. SO THE ROOM AND MEAL PRICES FOR CONFERENCE PARTICIPANTS ARE AS FOLLOWS:

a) Single room : B+B:€60- Half Board:€80-Full Board:€100

b) Double room:B+B :€80- Half Board:€120-Full Board:€160

d) Dinner for Conference participants: 20.00 Euros per person

Please note that the above prices for conference participants are also valid for a period of 3-5 days before and after the conference.

DATE:.....SIGNATURE.....

# 21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

## ACCOMMODATION FORM No. 8 PAFOS GARDENS HOTEL (3\*)

NAME : .....

TITLE - POSITION : .....

ADDRESS : .....

TELEPHONE : .....FAX: .....E-mail

The participants who do not wish to stay in CORAL BEACH HOTEL AND RESORT may prefer to stay in PAFOS GARDENS HOTEL (3\*) which is located in the town of Pafos and belongs to the same Hotel Leptos Company. They have to follow the same procedure as before, i.e.

**I have submitted application forms no 1, 2 & 3 and paid the conference fee to the Organising Committee.**

**a. I send you a cheque of 200 Euros net on the name of K. Boudouris (drawn on a European Bank) as a deposit for accommodation (which is non-refundable).**

**I wish to book a room..... (1, 2, 3 beds)  
in PAFOS GARDENS HOTEL (mark with X) :**

**15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 26, 27, 28, 29, 30, 31,**

a. Payments for accommodation can be made by cheque or bank order in Euros. Cheques or orders in euros or in dollars should be on the name of K. Boudouris and drawn correspondingly on a European Bank or a US Bank. So, orders and cheques should be made payable to: 21st ICOP-K. Boudouris, 5 Simonidou Str., 174 56 Alimos, GREECE.

b. Bank account payments for accommodation deposit should be made to the following account number : { National Bank of Greece, K. Boudouris-21st 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 (+30210-9923281) or by e-mail: [kboud714@ppp.uoa.gr](mailto:kboud714@ppp.uoa.gr) as PDF format.

**FOR THIS HOTEL ALSO SPECIAL ARRANGEMENTS HAVE BEING MADE ONLY FOR THE CONFERENCE PARTICIPANTS (A REDUCTION OF 60% OF THE NORMAL PRICE OFFERED TO THE CONFERENCE) THANKS TO THE NEAPOLIS UNIVERSITY OF PAFOS (NUP) MEDIATION. SO THE ROOM AND MEAL PRICES FOR CONFERENCE PARTICIPANTS ARE AS FOLLOWS:**

**a) Single room : B+B:€ 40- Half Board:€52-Full Board:€64**

**b) Double room:B+B :€50- Half Board:€74-Full Board:€98**

Please note that the above prices for conference participants are also valid for a period of 3-6 days before and after the conference.

**A Bus transfer free of charge from the above Hotel to Coral Beach Hotel can be arranged for the Conference participants.**

Participants who arrange their own accommodation are requested to send the Travel Form together with their Hotel Accommodation Form to the Secretariat of the Conference Organising Committee.

**Date:.....Signature : .....**

21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

FORM No. 10

(To be submitted to the Organising Committee by 15th JUNE 2009)

**CONFERENCE BEACH PARTY  
(OR A GREEK EVENING ENTERTAINMENT)**

**(Participation Fee for each person: 20 Euros)**

NAME : .....  
ADDRESS : .....  
TELEPHONE : .....  
FAX : .....  
E-MAIL.....  
MOBILE PHONE.....  
PERSONS:.....

a. I send you a cheque of 20 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, K.Boudouris-21st 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](mailto:kboud714@ppp.uoa.gr) as PDF format.

DATE : .....

SIGNATURE:.....

21st INTERNATIONAL CONFERENCE OF PHILOSOPHY

PARTICIPATION FORM No. 11

(To be submitted to the Organising Committee by 15th JUNE 2009 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, K.Boudouris-20th ICOP, BANK-BRANCH: 151/622563-23.  
IBAN ACCOUNT: GR 1501101510000015162256323, Swift Code (BIC): ETHNGRAA }.  
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](mailto:kboud714@ppp.uoa.gr) as PDF format.

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

DATE : .....

SIGNATURE:.....

**21st INTERNATIONAL CONFERENCE OF PHILOSOPHY**

**FORM No. 12**

**ONE DAY EXCURSION**

**(To be submitted to the Organising Committee by 15 JUNE 2009 or earlier )**

**(Participation Fee for each person: 30 Euros)**

1. Excursion takes a full day.
2. Departure from **CORAL BEACH HOTEL** at 8.30. Return to Hotel at 19.00.
3. It will include visits to ARCHAEOLOGICAL SITES AND OTHER WORTH VISITING PLACES OF CYPRUS and a stop for lunch and probably 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 2009 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, K. 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](mailto:kboud714@ppp.uoa.gr) ) in PDF format. All Bank charges for remittance must be paid by the participant.