

Please return this form to:

20th ECCMID, c/o Congrex Switzerland Ltd. Association House,
P.O. Box, 4002 Basel, Switzerland, Fax +41 61 686 77 88
or register online via: www.esccmid.org/eccmid2010**Registration Form PRESS**

(one form per active participant)

Contact details Ms Mr Prof PD Dr

Family name _____ First name _____

Institution / Company _____

Department _____

Street, No. / P.O. Box _____

Postal Code / Zip Code _____ City _____

State _____ Country _____

Email _____

Phone business _____ Mobile phone _____

Fax _____

Registration

360 Press * _____ free of charge _____

* In order to register as "Press" a Press ID is required

Cancellation policy: Refund of registration fees, less 25% administrative charges, can be applied for in writing until 25 February 2010 to the Administrative Secretariat in Basel / Switzerland. After this date no refund will be possible. For any change of names, a fee of € 30 will be charged. The participant acknowledges that he/she has no right to lodge damage claims against the organizers should the holding of the congress be hindered or prevented by unexpected political or economic events or generally by force majeure, or should the nonappearance of speakers or other reasons necessitate programme changes. With registration the participant accepts this proviso.

Fields marked in red can be completed electronically**Social events and tours** Details see pages 30–33

Event	Date	Rates	No. of Persons	Subtotal in €
Opening Cer. & Welcome Rec.	10/04/2010, 19.00 – 22.00	free		free 500
Concert	11/04/2010, 20.00 – 22.00	<input type="checkbox"/> € 52		540
Dinner at "Heuriger"	12/04/2010, 19.00 – 22.30	<input type="checkbox"/> € 49		550
Tour 1	11/04/2010, 9.00	<input type="checkbox"/> € 34		600
Tour 2	11/04/2010, 14.00	<input type="checkbox"/> € 21		610
Tour 3	12/04/2010, 9.00	<input type="checkbox"/> € 50		620
Tour 4	12/04/2010, 14.00	<input type="checkbox"/> € 34		630
Tour 5	13/04/2010, 9.00	<input type="checkbox"/> € 44		640
Tour 6	13/04/2010, 14.00	<input type="checkbox"/> € 29		650
Post Congress Tour	14–15/04/2010	<input type="checkbox"/> double <input type="checkbox"/> € 232 p.p. <input type="checkbox"/> single <input type="checkbox"/> € 252 p.p.		660 665

Total amount in €: _____**Payment instructions** The total amount will be paid as follows:

Bank transfer to UBS AG, Basel, Switzerland
Euro-account no. 233-503.010.74C [c/o Congrex Switzerland Ltd., ECCMID 2010]
BIC: UBSWCHZH80A / IBAN no: CH620023323350301074C

 Visa Mastercard American Express

No. _____

Expiration date CVV2 Code [Visa, Mastercard, last 3 digits in the signature field on your credit card]
CVV2 Code [American Express, last 4 digits on the front of your credit card on the right hand side]

Cardholder's name _____

Date _____ Signature _____