

Fields marked in red can be completed electronically!

Registration Form (one form per active participant) Please note that you can also register on-line: www.akm.ch/ectrims2007

Mr Mrs Prof. PD Dr.

Please return before **August 14, 2007** to:

Family name (please underline) / First name, initial(s)

Hospital / Institute / Company

Department

Street, No.

P. O. Box

Postal code / Zip code

City

Country

State / County (where applicable)

E-mail

Telephone business

Telephone home

Fax

Do not complete

Status

Invited by / Part of group

ECTRIMS 2007
c/o AKM Congress Service
P. O. Box
4005 Basel
Switzerland
Fax: +41 61 686 77 88

Registration Fees

until August 14, 2007 as from August 15, 2007

100 Congress delegates ECTRIMS	€ 450	€ 600	_____
150 Members of RIMS** Please state your occupation _____	€ 200	€ 300	_____
200 Physicians in training, researchers and therapists*	€ 200	€ 300	_____
400 Accompanying person Name / First name _____	€ 30	€ 40	_____

Accompanying person

* Physicians in training: colleagues born after January 1, 1972; copy of passport requested / Therapists: Confirmation from head of department required

**RIMS members: Copy of membership fee receipt for 2007 requested

Teaching Courses

Nr. of Courses

until August 14, 2007 as from August 15, 2007

Fee teaching course 1 – 8

€ 30

€ 40

Teaching Courses during the ECTRIMS meeting are subject to ECTRIMS congress registration.

Thursday, October 11, 2007 (morning) / please tick off the course(s) you want to participate in

500 08.30 – 10.00 <input type="checkbox"/> The CSF in MS	520 10.30 – 12.00 <input type="checkbox"/> Experimental models of MS
505 08.30 – 10.00 <input type="checkbox"/> MS immunology for the clinician	525 10.30 – 12.00 <input type="checkbox"/> MS genetics
510 08.30 – 10.00 <input type="checkbox"/> How to read a clinical study report	530 10.30 – 12.00 <input type="checkbox"/> Update in MS epidemiology
515 08.30 – 10.00 <input type="checkbox"/> MRI update, Basic principles and role in diagn.	535 10.30 – 12.00 <input type="checkbox"/> MRI update; Advanced techniques

Social Events

Number of Persons

550 Welcome Reception	Thursday, October 11, 2007	_____	free
560 Concert	Friday, October 12, 2007	_____	€ 30
570 Conference Dinner	Saturday, October 13, 2007	_____	€ 55

Excursions

Number of Persons

600 Grand Tour of Prague	Thursday, October 11, 2007	_____	€ 39
610 Grand Tour of Prague	Saturday, October 13, 2007	_____	€ 39
620 Jewish Quarter	Friday, October 12, 2007	_____	€ 44
630 Czech Evening	Friday, October 12, 2007	_____	€ 50
640 Art Nouveau	Saturday, October 13, 2007	_____	€ 42
650 Baroque Prague	Saturday, October 13, 2007	_____	€ 43
660 Carlsbad	Sunday, October 14, 2007	_____	€ 110

Total €

The total amount will be paid as follows: Bank transfer to UBS AG, Basel, Switzerland, Account No. 233-503.010.49 M (ECTRIMS 2007 c/o AKM)

IBAN CH71 0023 3233 5030 1049 M BIC UBSWCHZH80A

Bank cheque No. _____ enclosed Visa Mastercard

(Last 3 digits in the signature field on your credit card)

No. _____

Date of expiration _____

CV2 Code _____

Date: _____

Signature: _____

Your registration will be accepted only upon receipt of payment. In case of cancellation, the fees minus handling charges (25%) will be refunded, provided the cancellation is made in writing up to August 14, 2007. The participant acknowledges that he / she has no right to lodge damage claims against the organisers should the holding of the meeting be hindered or prevented by political events (such as acts of terrorism, danger of hostility, war etc.) or by unexpected economic events or generally by force majeure, or should the non-appearance of speakers or other reasons necessitate programme changes. With registration, the participant accepts this proviso.