



Please fill in this form and send it by fax,  
mail or e-mail **no later than April 15th, 2011:**

**Adria Congrex**

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**PERSONAL DETAILS**

Family name \_\_\_\_\_ First Name \_\_\_\_\_  
 Working details \_\_\_\_\_ Hospital \_\_\_\_\_  
 Address \_\_\_\_\_ Zip code \_\_\_\_\_  
 City \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Invoice address (with VAT code – for EU countries) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**REGISTRATION FEES** All fees are requested in Euro

**CONGRESS**

**Registration fees (VAT 20% included)**

Delegate	Euro 660,00
Accompanying person	Euro 300,00

**The delegate registration fee includes:**

Attendance to all the scientific sessions including luncheon panels (limited to seat availability), entrance to the exhibition area, meeting proceedings, attendance certificate, badge and congress kit, welcome opening reception and coffee breaks at the Venue.

**The accompanying person registration fee includes:**

Entrance to the exhibition area, welcome opening reception and half day excursion.

**COURSES**

**Registration fees (VAT 20% included)**

BLS-D COURSE	Euro 240,00
INTENSIVE CARDIOLOGICAL CARE	Euro 984,00
	<b>1 day participation</b>
ALLIED PROFESSIONAL	Euro 60,00
	<b>2 days participation</b>
	Euro 100,00

**BASIC LIFE SUPPORT - DEFIBRILLATION COURSE**

**The registration fee includes:** participation to the Course, entrance to the exhibition area, BLS-D license, coffee breaks and light lunch taken at the Venue. **Maximum 36 participants** assigned on first come first served basis, after the full payment of the charge with date and timetables to be respected.

**INTENSIVE CARDIOLOGICAL CARE**

**The registration fee includes:** participation to the course (3 days), badge, training manual, entrance to the Exhibition Area, Competence in Intensive Cardiological Therapy license (if accomplished), welcome opening reception, coffee breaks and light lunch. **Maximum 25 participants** accepted on first come first served basis, after the full payment of the charge. Date and timetables must be respected.

### ALLIED PROFESSIONAL

The registration fee includes: participation to the Course, entrance to the exhibition area, coffee breaks and light lunch taken at the Venue. **Maximum 80 participants** assigned on first come first served basis, after the full payment of the charge.

**AFTER MAY 15<sup>th</sup> 2011 REGISTRATIONS CAN BE MADE ON SITE**

### CANCELLATION POLICY

Any cancellation should be notified in writing to the Organizing Secretariat and will be subject to the following conditions:

**Before January 31<sup>st</sup>, 2011:** Refund of registration less a 30% administrative charge.

**After February 1<sup>st</sup>, 2011:** No refund of any kind.

All refunds, if any, will be done after the congress (**all costs to receiver's charge**).

No refund in any case will be made for BLS-D and INTENSIVE CARDIOLOGICAL CARE Courses registrations.

### RESUME

Delegate	No. _____ x € _____ = € _____
BLS-D Course <b>May 31</b>	No. _____ x € _____ = € _____
Intensive Cardiological Care	No. _____ x € _____ = € _____
Accompanying person	No. _____ x € _____ = € _____
Allied Professional <b>1 day</b> <input type="checkbox"/> <b>May 29</b> <input type="checkbox"/> <b>May 30</b>	No. _____ x € _____ = € _____
Allied Professional <b>2 day</b> <b>May 29-30</b>	No. _____ x € _____ = € _____

**GRAND TOTAL = €**

### PAYMENT CONDITIONS

Accepted payments are: cheque written on Italian Banks, credit cards, Bank transfer in Euro (made out to Adria Congrex Carim Bank Branch no. 14 IBAN code **IT18N0628524214CC0142118559** – swift code **CRRN IT 2R**).

**All costs to transmitter's charge.**

Please indicate clearly your name, address and MCM 2011 code **1000509RERI** on cheques and money orders. Registration will be confirmed only on receipt of the due amount. Adria Congrex will provide regular invoice for registration fee(s).

The form should be fully completed with the European VAT code (only for EU countries) and the invoice address.

### PAYMENT METHODS

I enclose a **bank cheque** made out to Adria Congrex of € \_\_\_\_\_

I enclose a copy of the **bank transfer** made out to Adria Congrex of € \_\_\_\_\_

**Credit card** :  **VISA**  **Carta Si**  **Mastercard**  **American Express**  **Diner's**

Card number \_\_\_\_\_ Card holder \_\_\_\_\_

Date of birth \_\_\_\_\_ Expiration date \_\_\_\_\_ Total amount \_\_\_\_\_

Date \_\_\_\_\_ Card holder signature \_\_\_\_\_

**In case of payment by credit card we will charge only the registration fee(s). Please, send a copy of the credit card (front and back) and of your identity card (front and back). In case of payment by credit card,**

Date \_\_\_\_\_ Participant signature \_\_\_\_\_

### Information on article 13 Legislative Decree nr. 196 dated 30.06.2003

The personal data acquired thanks to the present module is collected for purposes connected to execution of the congress and will be processed using both electronic and non-electronic tools. The data collected will be processed only by appointed personnel (marketing, administration and secretariat employees). The data may be communicated to professionals, hotels, travel agencies, airline and shipping companies, affiliated professional bodies, banks, the Ministry of Health for CME purposes and any other sponsors. Providing data (such as name, surname, address, profession, fiscal code, VAT number, place and date of birth, telephone and e-mail) is compulsory in order to make hotel bookings, register for the congress, issue standard invoices and for CME registration. The above mentioned data (e-mail address and fax number) may also be used to inform you of our future events providing that you authorise us to do so by ticking the appropriate box. Although refusal to provide authorisation to send communication linked to our activities will not prejudice your registration for the congress, we will not be able to contact you to inform you of any future events. The data controller is "Adria Congrex Srl" with head offices at 3, Parco Federico Fellini, 47900, Rimini. We would like to remind you that your rights are recognised by article 7 of Legislative Decree nr. 196 dated 30th June 2003, in particular the right to access your personal data, request its modification, updating and cancellation if incomplete, incorrect or collected in breach of the law, as well as, object to its processing for legitimate reasons, by addressing your requests to the data controller at the following address info@mcmweb.it

I authorise for my personal data to be processed to inform me of similar initiatives or consultancy services provided by the data controllers.  YES  NO

I would like to receive information by e-mail or fax.  YES  NO

Date \_\_\_\_\_

Participant signature \_\_\_\_\_