

ECCR REGISTRATION FORM: 9th - 11th October 2009, Nice, France
 for Post/Fax Registrations – Delegates wishing to register ON-LINE should go to www.eccr.org

Last/Family Name: First Names:

Prof/Dr/Mrs/Miss etc: Male Female

Speciality: Grade:

Work Address:

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Post Code: E-mail:

(It is important that you include an e-mail address so that notification can be sent to you when final details are available on-line)

Business Tel. No: Fax No:

Registration Fee	<i>Please tick (✓) relevant box</i>	PAYMENT (euros)
Payment includes access to all scientific sessions, conference materials, coach transfers and accommodation/meals (as shown below). Please note that we are unable to offer a reduced fee for delegates who do not require accommodation or all meals.	<input type="checkbox"/> ECCR Member €350.00	€
	<input type="checkbox"/> Non-Member €400.00	€
Fondation Maeght Art Museum – Saturday 10th October Payment includes entrance fee to the Art Museum and return coach transfers between the venue and the museum in St. Paul de Vence tickets @ €20.00 each	€
St. Paul de Vence (coach transfer only) – Sat 10th October Payment includes return coach transfers only between the venue & the drop-off point for the Art Museum in St. Paul de Vence (5-10 min walk to town) tickets @ €10.00 each	€
TOTAL AMOUNT (euros)		€

Requirements	<i>Please tick (✓) relevant box</i>	Friday 9th Oct	Saturday 10th Oct	Sunday 11th Oct
I will require dinner on:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	n/a
I will require accommodation on:		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	n/a
Dietary Requirements: <input type="checkbox"/> Vegetarian <input type="checkbox"/> Other (Please state foods that you are unable to eat)				
Access needs <input type="checkbox"/> (please specify, e.g. wheelchair user, mobility difficulties, hearing impaired etc)				

Payment Details	<i>Please fully complete – all sections are essential in order to process payment All payments must be in Euros</i>
<input type="checkbox"/> By Cheque/Bank Draft	Payable to 'ECCR' in Euros (sterling cheques cannot be accepted)
Please note: - Unfortunately we are unable to accept payments by American Express or debit cards - Credit card payments (MasterCard and Visa) are subject to an additional charge of 2.95%. - If your card account is not in euros, the payment will be converted into your own currency by your card issuer. The card issuer will use the exchange rate in effect on the day payment is taken, and they may also charge you a currency conversion fee	Credit Card: Please deduct the total sum due from: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa
	Card No:
	Expiry Date: Cardholder's Signature:
	Card Security Code (last 3 digits of code on the back of the card):
	Name and address (including post code) of the cardholder:

By returning the completed registration form you are confirming agreement for your name and town being listed on the participants list, to your e-mail address being used by the Secretariat and to the terms and conditions of the meeting including credit card charges and cancellation policies outlined on the preceding pages.	

Hampton Medical Conferences may make your contact details available to selected third parties that may be of interest to you. If you do NOT want your details to be passed on, please tick here:

Please return to: ECCR – Conference Registration, Hampton Medical Conferences Ltd., 113-119 High Street, Hampton Hill, Middlesex, TW12 1NJ, U.K. (Fax: +44 (0) 20 8979 6700 – for credit card registrations only)