



**14th CONGRESS
12TH-16TH OCTOBER 2005
LONDON, UK**



METHODS OF PRE-REGISTRATION

All pre-registrations must be received by **17:00 on Friday 30th September 2005**

- ONLINE: Visit www.eadv2005.com and click on the registration link
 BY FAX: Complete this form using BLOCK CAPITALS and fax to +44 (0) 870 429 4613
 BY POST: Complete this form using BLOCK CAPITALS and send to EADV
 Conference 2005, Data House, Curriers Close, Tile Hill, Coventry, CV4 8AW, UK

REGISTRATION CANCELLATION

Cancellations received Before August 15th 2005 Fee paid will be refunded less a 30% administration fee
 After August 15th 2005 No refunds received after this date will be made.

Participants are **strongly** advised to take out cancellation insurance.

Any changes or cancellations of registration should be made in writing to EADV Conference 2005, Data House, Curriers Close, Tile Hill, Coventry, CV4 8AW

A – DELEGATE DETAILS

Title Prof Dr Mr Mrs Ms Other _____ (please give details)

First Name _____ Family name _____

EADV Membership number _____ **(MUST BE COMPLETED IF YOU WISH TO REGISTER AT THE EADV MEMBER RATE)**

Address _____

City _____ County/State _____ Zip Code _____

Country _____ E-mail _____

Tel _____ Fax _____ Mobile _____

Accompanying Person (s): *(Please note this section only applies to accompanying persons being registered for the Congress)*

Family Name _____ First Name _____

Family Name _____ First Name _____

B – REGISTRATION FEES (EUROS)

	EARLY Before 30th June 05	LATE Before 30th September 05	ON SITE After 30th September 05
EADV Member*	<input type="checkbox"/> €450.00	<input type="checkbox"/> €550.00	<input type="checkbox"/> €650.00
Non Member	<input type="checkbox"/> €650.00	<input type="checkbox"/> €750.00	<input type="checkbox"/> €850.00
Residents**	<input type="checkbox"/> €220.00	<input type="checkbox"/> €300.00	<input type="checkbox"/> €350.00
Students**	<input type="checkbox"/> €120.00	<input type="checkbox"/> €150.00	<input type="checkbox"/> €170.00
Nurses**	<input type="checkbox"/> €120.00	<input type="checkbox"/> €150.00	<input type="checkbox"/> €170.00

* If you wish to join the EADV and benefit from the special EADV membership registration rate you must join before 31st August 2005. An application form is enclosed and should be returned to the EADV.

** Please attach proof of status to your registration form without this you are not eligible to register under one of these categories.

Accompanying Persons _____ Number _____ @ 120.00 € _____

REGISTRATION SUBTOTAL € _____

C – LUNCH WITH THE EXPERTS (Please select your preferred lunch. Only 1 lunch per day permitted. See list on Pg 12-13)

Thursday 13th October FEE (€35 per lunch)
 L1 L2 L3 L4 L5 L6 L7 L8 € _____

Friday 14th October
 L9 L10 L11 L12 L13 L14 L15 L16 € _____

LUNCH WITH THE EXPERTS SUBTOTAL € _____

D – COURSES (Please select your preferred course. Only 1 course per day permitted. See list on Pg 8)

Thursday 13th October FEE (€35 per lunch)
 C1 C2 C3 C4 C5 € _____

Friday 14th October
 C6 C7 C8 € _____

Saturday 15th October
 C9 C10 C11 € _____

COURSES SUBTOTAL € _____

E – LUNCH TICKET

Number required

Thursday 13th October _____ @ €25 € _____

Friday 14th October _____ @ €25 € _____

LUNCH TICKET SUBTOTAL € _____

F – SOCIAL PROGRAMME

(please tick if attending)

12th October Welcome Reception € Free of charge

14th October Gala Dinner, The Old Billingsgate Market _____ tickets @ €120 € _____

SOCIAL PROGRAMME SUBTOTAL € _____

TOTAL TO BE PAID (sum of B+C+D+E+F) € _____

METHOD OF PAYMENT

CHEQUE (Cheques must be in EUROS and made payable to 'EADV London Conference Ltd')

BANK TRANSFER For details of how to pay by bank transfer please visit www.eadv2005.com

CREDIT CARD VISA MasterCard American Express SWITCH

CARD NUMBER

EXPIRY DATE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--

START DATE

--	--	--	--

 ISSUE NO. (SWITCH ONLY)

--	--

Name of cardholder (as it appears on credit card):

_____ Total amount to be debited: _____

Cardholder's Address: _____

32 Date: _____ Signature of card holder: _____

