REGIONE DEL VENETO PELVIC FLOOR UNIT   IDEPARTMENT OF SURGERY, IDEPARTMENT OF SURGERY,   REGIONAL HOSPITAL "CÀ FONCELLO", TREVISO - I   XXI INTERNATIONAL COURSE						
	ULTRASONOGRAPHI OF PELVIC FLOOR DI		NOVEMBER 22 <sup>ND</sup> TREVISO - I	– 24 <sup>™</sup> , 2017		
REGISTRATION FORM	Please type in Block Letters and Fax or Email with a copy of your receipt of payment to:	key congress	5 <b>Key congress&amp;communica</b> Via Makallè, 75 - 35138 Pad T.+39 049 8729511 - F.+39 registration@keycongress.co	ova - I 049 8729512		
PERSONAL DATA Fiscal Code (Only for italian Partecipants) VAT number						
Family Name		First Name				
Title Prof. Dott.	_@					
Email address	_ @	Mobile phone				
OFFICE ADDRESS						
Institute						
Position		Departement				
Nr. Street						
Area code City			Country			
Telephone (office hours): Country code / city	code /number	Fax				
OFFICE ADDRESS (If different from the	above)					
L						
VAT number						
Nr. Street						
Area code City			Country			

The undersigned certifi es, on his/her own responsability, that the abovementioned information is true and corresponds to actual fact, exempting the congress organizer from any tax liability in the event of incorrect information being provided.

Registration fees		
Delegate   € 800,00 + VAT 22% = € 976,00		

Only for Italian Delegates: in case of payment by Public Body (VAT exempt under DPR N°633/72 and following changes), the invoice of the registration will have to be authorized by the same Public Body. The Registration form must be sent with a copy of the authorization document by Public Body and the details of invoice to the same. The Registration Fee will VAT EXEMPT.

**Registration fee includes:** Partecipation to all scientific sessions; Congress kit; Certificate of Attendance; Coffee breaks and lunches; Course's Dinner.

## **METHOD OF PAYMENT**

**OPTION 1 - Credit Card** 

Mastercard

			L		
Card Number					

Visa

Card Number

		l
Expiry D	Date	
Month/	/ear	

Name shown on card (family name/first name)

## **OPTION 2 - Bank Transfer**

Bank transfer payable to: KEY CONGRESS & COMMUNICATION Cassa di Risparmio del Veneto IBAN Code: IT 89 A 06225 12150 07400 337803W SWIFT/BIC Code: IBSPIT2P

Please send copy of your bank transfer together with your registration form. Bank transfer will not allowed after September 1st, 2017

## **CANCELLATION POLICY**

Notification of cancellation must be sent in writing to the Organizing Secretariat. Cancellations will be accepted until November 1st, 2017 with a refund of all prepaid fees, except for a 30% administration charge. No refunds will be made for cancellations received after this date.

TOTAL AMOUNT TO BE PAID	Registration fee	€,	#
	Total to be paid	€,	#
ARE YOU SPONSORED BY A CON	<b>//PANY?</b> Yes	No	

Please indicate the name of your company. Please note, the maximum credit limit with reference to the last three years, is 1/3 (50 in 3 years) by means of sponsorship.

## PRIVACY AND TREATMENT OF PERSONAL DATA (L.D. 196, 30/06/2003)

Key Congress S.r.I., as data controller and/or processor, informs you that any personal data you provide, or any data received by third parties, will be used in connection to your participation to the event. Key Congress S.r.l., as data controller and/or processor may avail itself or its associates to carry out any of the following procedures: communications to clients, data processing and computer-based consultation. The data can be communicated to financial and banking intermediaries, as well as suppliers and companies participating in the event with promotional functions compatible with the purposes for which the data has been collected. The provision of your personal data is voluntary, but refusal will prevent your participation to the event. Under section 7 of the Legislative Decree n° 196 of 30 June 2003 you have the right to object the processing of your personal data for the purposes of sending advertising materials or direct selling or else for the performance of market or commercial communication surveys.

Any request can be addressed to: Key Congress & Communication S.r.I., Via Makallé, 75 - 35138 Padova, Italy. For more information please go the web site www.keycongress.com.

I authorize the treatment and communication of my personal data as described above.

I don't authorize the treatment and communication of my personal data as described above.



Signature \_\_\_\_