

4<sup>th</sup> International Congress on  
**Endometriosis**  
Roma - May 28-30, 2009

**Registration and Accommodation Form**

Family Name ..... First Name.....  
Address ..... City.....  
Zipcode ..... State ..... Country ..... Phone .....  
Fax ..... Email .....

Invoice to be headed to .....

For Italian participants only - Partita IVA and codice fiscale .....

**ACCOMMODATION (NEAR CONGRESS VENUE)**

\*Centro Italiano Congressi has reserved a limited number of rooms at special prices in the following hotel

**Please check the availability with the Organizing Secreteriat before the payment**

Hotel Pineta Palace \*\*\*\*  Double room single use euro 146,00  Double room euro 173,00

**Check in date** ..... **Check out date** ..... **N. of nights** .....

Room prices are in euro per night and include breakfast and VAT.

For the Hotel reservation, please send the form not later than January 20<sup>th</sup>, 2009 together with the deposit for the first night plus **agency fee of euro 25,00.**

Only guaranteed reservations (with payment) will be accepted. The deposit will be deducted from the final hotel bill when paid by the participant at the hotel. The deposit related to the first night won't refunded in case of cancellation.

**REGISTRATION FEE** (All payments in euro - VAT included)

Participants  euro 360,00 Before 31<sup>th</sup> March  euro 420,00 After 31<sup>th</sup> March  
Midwives  euro 120,00 Before 31<sup>th</sup> March  euro 150,00 After 31<sup>th</sup> March  
Trainees\*  euro 120,00 Before 31<sup>th</sup> March  euro 150,00 After 31<sup>th</sup> March  
Daily  euro 150,00  
Social dinner  euro 88,00

\* Certification of status required for Trainees

**The registration fee includes participation at the scientific session, the conference kit, welcome cocktail, coffee breaks and lunches.**

**PAYMENT DETAILS** (All payments in euro)

Registration fee	euro.....
First night in hotel	euro.....
Agency fee	euro 25,00.....
Social dinner	euro 88,00.....
<b>Total</b>	<b>euro.....</b>

Please check the appropriate box:

- International Bank Cheque** made payable to Centro Italiano Congressi CIC S.r.l.  
 **Bank transfer** in EURO made payable to Centro Italiano Congressi, Deutsche Bank, Agenzia F - Rome  
IBAN CODE IT 42 CO31 0403 2050 0000 0170 335 - SWIFT (BIC) DEUTITM1586

**Please return the completed form, together with your payment (cheque or copy of bank transfer), to Centro Italiano Congressi CIC S.r.l.**

Corso Trieste, 42 - 00198 Roma - Ph. +39 06 8412673 Fax +39 06 8412687 - e-mail: congressi@gruppocic.it

**Legislative decree 196/2003 "Personal Data Protection Code".**

The responsible for personal data processing is Centro Italiano Congressi CIC S.r.l., Corso Trieste 42, 00198 Roma.

In accordance with the provisions of art. 13, CIC assures you that all information provided will be secure and kept confidential. CIC assures you that your personal details and all other information supplied voluntarily, will be used, with your consent, in regard to this and future events. This data will only be used internally and by any subsequent third parties involved solely for contractual reasons. However, in accordance with the provisions of art. 7, you have the right to request, to delete, or to change your personal data. You will be able to exercise such rights by writing us. The undersigned expresses his/her consent to such information processing:

Date ..... Signature .....