

**The 2nd ISUOG
Advanced Course 2019 and 3D Ultrasound Workshop
April 26 – 28, 2019 at Le Royal Hotel - Lebanon**

Please send this form to INFOMED International for Events s.a.r.l

P.O.Box: 90-361 Beirut, Lebanon

Tel: +961 1 510881/2/3 Fax: +961 1 482116

E-mail: elysem@infomedweb.com

Registration & Hotel Reservation Form

1 Personal Data

Mr.
 Mrs.
 Ms.
 Dr.
 Pr.

- Last name (Family name)
- First name (Given name)
- Address
-
- Postal / Zip code City
- City
- State / Province Country.....
- Country.....
- Telephone Fax.....
- Fax
- E-mail (compulsory field)
- Your specialization is (mandatory to process your application):
- Year of Practice:
- Hospital

2 Registration Fees

<u>I- Course on April 26 and 27:</u>	<u>Early Bird (Till March 30)</u>	<u>Late Registration & Onsite</u>
• Lebanese and International Physicians	\$150	\$200
• Residents, Interns, Students and Midwives	\$75	\$100
<u>I- Workshop on April 28:</u>		
• Physicians (Registration required – Limited Places)	\$100	
• Midwives, Midwives Students, Interns and Students	\$75	

Rates are subject to 11% VAT

3 Hotel Accommodation

SINGLE / DOUBLE

Le Royal Hotel (5*)
(Congress Venue)

Standard	160\$
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Single

Double

Twin - Bedded

Date of Arrival

Time

Flight

Date of Departure

Time

Flight

Rates are offered on Bed & Breakfast Basis, subject to 11% VAT

Transfer with Meet & Assist and drop off: **77 US \$** / per person

nbr of persons

Total

4 Method of Payment

TOTAL AMOUNT

BANK TRANSFER:

Account name: Infomed International for Events S.A.R.L

Bank Name: Bank Beirut

Bank Address: Horch Tabet Branch

***USD A/C:** 11-401-442760-00

IBAN # LB89 0075 0000 0001 1401 4427 6000

Chips UID: CH 015040

SWIFT related to Bank of Beirut S.A.L is: BABELBBE

Visa

Master Card

Card No:

Exp. Date:

Identification ALPHABETICAL Letter

Credit Card Charges: 2.5% to be added to the total amount