



# The European Society for Photodynamic Therapy

25-26 May 2012  
Tivoli Hotel & Congress Center  
Copenhagen, Denmark

[www.euro-pdt.org](http://www.euro-pdt.org)



# CopeNhaGeN

## REGISTRATION FORM

Please mail or fax to:

VISTA

EURO-PDT 2012  
9 rue Henri Martin  
92772 Boulogne Billancourt Cedex - France  
Tel: +33 (0)1 46 43 33 42 - Fax: +33 (0)1 46 24 88 38 - Email: [europdt2012@vista-fr.com](mailto:europdt2012@vista-fr.com)

### DELEGATE

Title \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Institution/Company \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

ACCOMPANYING PERSON

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

### REGISTRATION/DINNER FEES

12 <sup>th</sup> EURO-PDT Annual Congress 25-26 May 2012, Tivoli Hotel, Copenhagen	590 €	_____ €
Welcome Dinner, 24 May 2012	65 € x _____ pers	_____ €
Annual Congress Dinner, 25 May 2012	65 € x _____ pers	_____ €
<b>TOTAL</b>		<b>_____ €</b>

### REGISTRATION/DINNERS CANCELLATION POLICY

Cancellations must be notified in writing to VISTA and are subject to the following conditions:

- . Until 1<sup>st</sup> March 2012, 50% refund
- . After 1<sup>st</sup> March 2012, no refunds will be issued
- . All refunds will be processed after the meeting

I have read and accept the registration/dinners cancellation policy

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

### PAYMENT

By bank transfer in Euros to the order of VISTA/EURO-PDT to:

Bank code: 30788 - Sort code: 00900 - Account n° 01220780001 - Key 52 - IBAN: FR76 3078 8009 0001 2207 8000 152 - BIC: NSMBFRPPXXX  
(copy of bank transfer must be sent along with registration/hotel reservation form)

By credit card     Visa     Eurocard/Mastercard

Cardholder \_\_\_\_\_

Card number \_\_\_\_\_

Signature \_\_\_\_\_

Card verification code (3 digits on back of card) \_\_\_\_\_ Expiry date \_\_\_\_\_ (month) \_\_\_\_\_ (year)

By check in Euros (payable in France to the order of VISTA/EURO-PDT)