Euro EUS 2010 · Tel-Aviv · May 30-31, 2010

2 Days of Live Demonstrations

"EUS meets New Advancing Technologies"

The early registration fee is available until April 16, 2010, please complete this form and send it to the Euro EUS 2010 Congress Coordinator. After this date the registration fees will be increased.

Online registration/ hotel booking/payment is also available on our website: www.euro-eus.com

Participant's signature



Congress Coordinator Anne-France De Meyer 102, Avenue Carsoel – Bte 13 1180 Brussels – BELGIUM	Tel.: Fax: E-mail:	+32.2.375.36 +32.2.375.47 anne.france.c		be		
Participant(s)	○ Mr.		○ Mrs.	○ Prof	·.	○ Dr.
Last name			First name			
Institution						
Specialty	○ Gastroenterologist		○ GI Surge	on 🔘 Tho	○ Thoracic Surgeon	
	Pulmonologist		○ Radiologi	ologist O Pathologist		
	○ Nurse		○ Student	Other		
Address						
Postal code	City			Countr	у	
Telephone			Fax			
E-mail						
Accompanying Nurse (if	annlicable)			∩Mr		○ Mrs.
Last name			First name			
Thank you for printing your info Please don't forget to fill in you	rmation clearly.		-dd-t th.			
Please don't lorget to lill ill you	e-man address for Co	Jilli illation ai	iu upuates on the	e conference.		
Congress Registrat	ion					
Profile	Attendance	Until Apri	I 16, 2010	Until May 23, 2010	Until May 31	l , 2010
Physicians	O Full O 1 Day	350 ± 175 ±		400 € 250 €	450 € 300 €	
Nurses/Students	O Full O 1 Day	55 ± 30 ±		75 € 50 €	100 € 70 €	
Combined registration: 1 Physician & 1 Nurse	O Full O 1 Day	375 ± 190 ±		425 € 275 €	475 € 325 €	
Congress Dinner	○ 80 € x =	(Regi	stration reques	sted until May 24, 201	0)	
If you register and pay before Apr congress materials, access to all c please refer to the official program Payment: Bank cha	il 16, 2010, you will ben ongress facilities, lunch n brochure for the congi	es and refresh ress and to the	ment breaks. For p website www.eu	oayment details, general co ro-eus.com		tion fees,
Choose your way of pay						
VISA credit cardMASTERCARD/EUROCARD credit card				Bank transfer made to "DME/Euro EUS" Bank account no. 001-4727588-78 (BNP Paribas/Fortis, 99 Dieweg, 1180 Brussels) Swift Code: GE BA BE BB IBAN Code: BE 69 0014 7275 8878		
Card number				Expiry date (mont	h/year)	
Cardholder's name				CVC (Card Verification last three digits on the		
Cardholder's signature				Date		

With your signature you accept the general conditions for registration as mentioned on this form and in the official program for the congress. Your registration cannot be confirmed until your (valid) credit card details or your payment receipt have been received by the Congress Coordinator.

Date