## Registration & Reservation Form



www.dermoscopy-congress2018.com

Please type or print in capital letters and return this form to the Conference Secretariat: ERA Ltd, 17, Asklipiou Str, 10680, Athens, Greece either by Fax: (+30) 210 3631 690, or by e-mail: info@era.gr First name(s): Hospital/Institute/Company: ...... Department: .... ... Position: .... No: Street: Zip code: ......Country: ..... .. Fax: .. Country code / City code/ Number Country code / City code / Number E-mail\*: ...... \* Please complete this field. All confirmation will be sent via e-mail.

## Registration Fees (Fees are applicable to 24% VAT upon invoice issuance)

Registration type	Very early (01/02/2016-31/03/2017)	Early (01/04/2017-31/12/2017)	<b>Late</b> (01/01/2018- 05/06/2018)	On site
Members of the IDS	€ 300 □	€ 400 □	€ 500 □	€ 600 □
Members of the IDS (residents*)	-	€ 200 □	€ 250	€300 □
Non-members of the IDS	-	€ 500 □	€ 600 □	€ 700 □
Students*	-	€ 200 □	€ 200	€ 250
	Total for Registration Fees (I)			€

Registration Fees include for all delegates include: • Access to the scientific sessions, exhibition and poster area • Congress material • Certificate of attendance • Welcome cocktail & coffee breaks

<sup>\*</sup> These registration types are applicable if the doctor is still resident/student at the time of the congress (June 2018). Participants registered under this category should provide on-site a document verifying their status (residents/students) in Dermatology.

II. Hotel Accommodation (including breakfast & current taxes)\* / 06 / 2018 Arrival date: Departure date: / 06 / 2018 Preferred Hotel: 1st choice 2<sup>nd</sup> choice..... Distance from **Single** Double/Twin X nights Registration type the Venue The Met X..... 6,8km 164€ 184€ Makedonia Palace - city view rooms X..... 164€ 174€ 2,4 km Makedonia Palace - sea view rooms X..... 184€ 194€ X..... Capsis Hotel 8,7km 97€ 107€ Porto Palace 7,4km X..... 148€ 164€ Electra Palace – classic rooms 164€ X..... 148€ Electra Palace – premium rooms X..... 4,6km 158€ 174€ Electra Palace – superior rooms X..... 168€ 184€ City – standard rooms Χ..... 107€ 107€ 4,7km City - standard rooms - city view X..... 117€ 117€ Andromeda 5.1km 27 € 107€ X..... Mediterranean Χ..... 5,4km 164€ 153€ Luxembourg 5,1km 97€ X..... € Total for Hotel Accommodation (II) Total for Registration + Hotel Accommodation (I)+ (II) ₽ \* Prices are subject to Municipality Tax - The website will be updated in due time \* Bookings will be made for 3 nights minimum. Cancellation and Payment policy for Registration **Cancellation Policy** • Cancellation reguests must be made to the Congress Secretariat in writing. • For cancellation of registration received by May 2<sup>nd</sup>, 2017, a refund of the total fee, less 25 € as administration charge, will be made. • For cancellation of registration received by October 10th, 2017, a refund of the total fee, less 50% will be made. • After October 10th refunds for registration will not be possible. **Payment Policy** • Full payment of the registration must accompany this form. Cancellation and Payment policy for Accommodation **Cancellation Policy** • Cancellation requests must be made to the Conference Secretariat in writing: • For cancellation of accommodation, received until January 31st, 2018 a refund of the total fee, less 20€ administration fees, will be made. • For cancellation of accommodation, received between February 1st and May 1st, 2018 1 night will be charged as cancellation fees. • After May 2<sup>nd</sup>, 2018 refunds for accommodation will not be possible. **Payment Policy** • 1 night deposit is required to confirm your accommodation • Full payment for accommodation must reach the Secretariat before May 1st Method of Payment for Registration and Accommodation Payment can be effected either: a) By bank remittance to the order of ERA LTD stating the 5th WCD, as well as the name of the participant: To Alpha Bank to the order of ERA Ltd Account No: 101.00.2002.044307 IBAN: GR66 0140 1010 1010 0200 2044 307 SWIFT: CRBAGRAAXXX HOLDERS ACCOUNT: ERA LTD BANK ADDRESS: 40 STADIOU STR. P.C.102-52, ATHENS KENTPIKO Please enclose a copy of transfer receipt with the registration form. b) By major credit cards. Please complete the relevant information as described below. Written confirmation will be sent by **ERA Ltd**, upon receiving your form. MASTERCARD AMEX I authorize ERA Ltd to settle my account to the congress by May 1st, for the Sum of: € VISA Expiration Date: ...../ ..... Card Number:

Cardholder's name:.