



XXXV ANGIOLOGICAL DAYS 2010

Hotel Diplomat Prague, February 25 - 27, 2010



REGISTRATION AND ACCOMMODATION FORM

Please type or fill in this form carefully in CAPITALS and mail or fax to:
AMCA, spol. s r.o., Vyšehradská 320/49, 128 00 Prague 2, Czech Republic
Fax: +420 257 007 622, Phone: +420 257 007 629, +420 731 496 060, E-mail: angiologie@amca.cz

REGISTRATION:

Surname:.....First name:.....Title:.....
Institute/Department:.....
Address:.....
City:.....Country:.....Post code/ZIP:.....
Phone:.....Fax:.....E-mail:.....

ACTIVE PRESENTATION:

Lecture Poster

Title:.....
.....
Presenting speaker/author:.....
Co-authors:.....

REGISTRATION FEES	EARLY Up to January 24, 2010	STANDARD After January 25, 2010	ON SITE	CZK
Regular Fee	1.550 CZK	1.850 CZK	2.100 CZK	
Nurses, Students, Seniors	950 CZK	1.250 CZK	1.400 CZK	
Social evening - participant	300 CZK	300 CZK	350 CZK	
Social evening - accompanying person	550 CZK	550 CZK	600 CZK	
Lunch, February 25	380 CZK	380 CZK	400 CZK	
Lunch, February 26	380 CZK	380 CZK	400 CZK	
Accommodation	see reverse side of this form			
Registration fee includes: registration, participation in sessions and exhibition, conference materials, coffee breaks, VAT. Authors of presentations will receive a 50% discount of the registration fee.			TOTAL DUE:	

Average exchange rate of Czech National Bank is 25,90 CZK / 1 EUR.

RESERVATION OF ACCOMMODATION:

Arrival date:.....Departure date:.....Nights total:.....

HOTEL	SINGLE ROOM	DOUBLE ROOM	AMOUNT DUE
1. Hotel Denisa****	<input type="checkbox"/> 1.250 CZK	<input type="checkbox"/> 1.500 CZK	
2. Hotel DAP***	<input type="checkbox"/> 1.250 CZK	<input type="checkbox"/> 2.000 CZK	

If you are interested in accommodation at the Hotel Diplomat, please complete the on-line reservation form which can be found on www.angiologie.cz.

3. Hotel Diplomat****	2.250 Kč	2.625 Kč
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Note:.....

Accommodation includes bed, breakfast and VAT.

Your chosen accommodation cannot be guaranteed unless we received the registration form by January 24, 2010.

**Hotel assignment will be made on a first-come, first-serve basis,
therefore it is important to make your accommodation reservation as soon as possible.**

An up-to-date offer of hotels can be found at www.angiologie.cz.

Please note that accommodation reservation cannot be made without the deposit. The hotel voucher will be mailed to you upon receipt of payment.

PAYMENT:

 Direct Bank Transfer

Bank: ČSOB, Na Moráni 3, 128 00 Prague 2, Czech Republic
 Account Name: AMCA, spol. s r.o.
 Account Number: 198678537/0300
 IBAN: CZ30 0300 0000 0001 9867 8537
 BIC: CEKOCZPP
 Details of payment: 1001 + Name of registered participant

N.B. Please note that all direct bank transfer charges must be covered by the participant.

Please forward a copy of your bank transfer order to the address of the secretariat.

 By credit card. I hereby authorise you to charge my credit card with the amount:.....CZK

American Express Visa - CVV*..... Euro/Master Card - CVC*.....

* the last 3 small digits printed near your signature on the reverse side of the credit card

Name and address of the cardholder:.....

Credit Card No.:.....Expiry Date:.....

Cardholder's Signature:.....

CANCELLATION TERMS:

	to January 24, 2010	January 25 - February 7, 2010	February 8 - 21, 2010	from February 22, 2010
Registration Fee	10%	20%	50%	100%
Accommodation	100 CZK	50% of one night deposit	one night deposit	100%

Cancellation is only possible in writing. Please send by e-mail, fax or post to the address of the Secretariat.

I agree that my personal data will be used by AMCA, spol. s r.o. in agreement with the Law 101/2000, concerning private data protection.

Date:.....

Signature:.....