

# REGISTRATION FORM

Please, return this form as soon as possible and before March 20, 2007 to benefit from the reduced registration fee, to:

**PSORIASIS 2007 c/o MCI:** 24 rue Chauchat - 75009 Paris - France – Fax: 33 (0)1 53 85 82 83

(Please write in capital letters or staple a business card for all your details).

FOR AN EASIER AND FASTER REGISTRATION, YOU MAY ALSO GO TO: **www.pso2007.com**

## A PARTICIPANT

Pr  Dr  Mr  Mrs  Ms

LAST NAME/FAMILY NAME: \_\_\_\_\_

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

Institution: \_\_\_\_\_

Street/PO. Box: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Speciality:  Dermatologist  Pediatrician  Rheumatologist  
 Psychologist  General Practitioner  Others \_\_\_\_\_ (precise)

Please, note that your name and address will be published in the Congress' official list of participants unless you tick the box below.

I do NOT wish my name and address to appear in the Congress official list of Participants.

## B REGISTRATION FEES

REGISTRATION CATEGORY	EARLY BIRD FEES	LATE FEES	ON SITE
	Until 20/03/2007	After 20/03/2007	
PARTICIPANT	<input type="checkbox"/> 520 €	<input type="checkbox"/> 590 €	<input type="checkbox"/> 670 €
STUDENT*	<input type="checkbox"/> 160 €	<input type="checkbox"/> 160 €	<input type="checkbox"/> 160 €
PATIENT ASSOCIATION MEMBERS**	<input type="checkbox"/> Free	<input type="checkbox"/> Free	<input type="checkbox"/> FREE
<b>TOTAL B:</b>			..... €

\* Please provide certificate

\*\* Access only the Sunday Session (10:30-12:30). Please provide a copy of a valid membership card

All indicate rates above include a VAT of 19,60% at current rate at the day of printing.

Please note that **after June 8, 2007, pre-registrations will NOT be accepted** any longer by the Congress Office but **you will have the possibility to register on site.**

## C EVENTS

I will attend the Congress Dinner on Saturday, June 23<sup>rd</sup>, 2007 Nb Tickets: ..... x 90 €

**TOTAL C:** ..... €

## D HOTEL ACCOMMODATION

Please indicate your choice of hotel and note the deposit to pay (1 night deposit):

HOTEL CHOICE (Please indicate below)	ROOM TYPE	DEPOSIT TO PAY
1 <sup>st</sup> choice: .....	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Twin	..... €
2 <sup>nd</sup> choice: .....	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Twin	..... €
Reservation fees		+ 20 €
<b>TOTAL E:</b>		..... €

Arrival: ...../06/2007 – Departure: ...../06/2007 – Number of nights: .....  
HOTEL RESERVATION DEADLINE: May 25, 2007

Hotel reservation received after this date may not be guaranteed and will be made according to availability only  
**Reservation received without the required deposit and reservation fees will NOT be processed.**

**TOTAL (B + C + D):** ..... €

## E TRAIN COUPON

For participants travelling within France to Paris by train on the occasion of the Congress, special fares may be obtained with SNCF (French Railway Network).

I wish to receive ..... train coupon(s)

## F PAYMENT

By check payable in France to the order of **PSO 2007 c/o MCI**

By **Bank transfer** to the order of **PSO 2007 c/o MCI**

Crédit Lyonnais: Agence Paris Rue du Bac - 205, Boulevard St Germain - 75007 PARIS, France

Bank code: 30002 - Sort code: 00424 - Account number: 000 000 8833 S - Key: 88

IBAN: FR54 3000 2004 2400 0000 8833 S88 - BIC: CRLYFRPP

*Copy of the bank transfer must be attached to the registration form. Do NOT forget to give the name of the person you are paying for, on the bank transfer order.*

By credit card: VISA / MASTER / EUROCARD / AMERICAN EXPRESS

Number: | | | | | | | | | | | | | | | |

Card Verification Code (3 digits on the back of Visa/Mastercard, 4 digits on front of AMEX): \_\_\_\_\_

Expiry date: \_\_\_\_\_ (please do not forget)

SIGNATURE:

I hereby accept all registration conditions of the Congress and agree for the payment corresponding to my requests.  
**(Compulsary : Please sign also if you pay by cheque or bank transfer: forms without signature will not be processed)**