

# REGISTRATION & HOUSING FORM

Pre-registration before **August 23, 2021**

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THE 24<sup>TH</sup> INTERNATIONAL EXPERTS SYMPOSIUM

## CRITICAL ISSUES

IN AORTIC ENDOGRAFTING

**DECEMBER 17 & 18 2021**

### PARTICIPANT INFORMATION

Title:  Prof  Dr  Mr  Ms  
Last Name .....  
First Name .....  
Institution / Company .....  
Address .....  
Post Code ..... City .....  
Country .....  
Phone ..... Fax .....  
Mobile .....  
Email (mandatory) .....

Sponsored by .....  
Contact .....  
Address .....  
Post Code ..... City .....  
Country .....  
Phone .....  
Fax .....  
Mobile .....  
Email .....

### SPECIALITY

- |  |  |  |                                      |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> Vascular surgeon  | <input type="checkbox"/> Cardiac surgeon       | <input type="checkbox"/> Thoracic surgeon            | <input type="checkbox"/> Radiologist |
| <input type="checkbox"/> Cardiologist      | <input type="checkbox"/> Industry professional | <input type="checkbox"/> Vascular technician & nurse | <input type="checkbox"/> Other       |
| <input type="checkbox"/> Resident & fellow |  |  |                                      |

### INDIVIDUAL REGISTRATION FEES (VAT 20%)

	Before January 15	After January 15 & onsite
<input type="checkbox"/> Physicians or exhibitors	390 €	465 €
<input type="checkbox"/> Residents, fellows, nurses & technicians (a confirmation letter will be asked)	260 €	310 €
<input type="checkbox"/> Day Pass		299 €

For group reservation at preferential rates, contact Charlotte Martin: [cmartin@divine-id.com](mailto:cmartin@divine-id.com)  
Group cancellation policy, available on the website, supersedes general cancellation policy. Group reservation applies to more than one participant.

### HOTEL ACCOMMODATION (Prices include breakfast and 10% VAT)

	Single	Double
<input type="checkbox"/> <b>Pullman Paris Bercy</b> 1, rue de Libourne, 75012 Paris	255 €	284 €

### Booking Details

One night deposit is needed to confirm any hotel booking. The whole stay has to be paid before November 29 to avoid cancellation of reservation.

Arrival date     Departure date     Room type  Single  Double  Twin  
Nb. of nights   Rate per night ..... €

NB: City tax is payable directly on site to hotels.  
Refund of fee: a 10% administrative charge will be applied to cancellations up to D-30. After D-30 no refund will be given. No-shows at the hotel/congress will be charged the full fee. The whole package stay has to be paid before D-30 to avoid cancellation of reservation. NB: This cancellation policy is not applicable for Group/Sponsor reservations (please contact Caroline Lefrançois : [clefrancois@divine-id.com](mailto:clefrancois@divine-id.com)).

### TOTAL DUE

Registration ..... € + Hotel  1 night deposit  whole stay ..... € = ..... €

### Payment by

\* 3 last numbers on the back of the card

\*\* Your signature authorizes your credit card to be charged for the total payment due. We reserve the right to charge the correct amount if different from the total listed.

**Credit Card**  Visa  Mastercard (no other card)

Credit Card Number                       security code\*

Expiration date

Cardholder's Name ..... Cardholder's Signature\*\*

**Check enclosed** Please make check in Euros payable in France to **divine [id]**

**Bank Transfer**

Beneficiary	SARL <b>divine [id]</b>
Bank	Crédit Agricole
IBAN	FR76 1130 6000 9348 1141 8671 957
BIC	AGRIFRPP813