



COGEN – CONTROVERSIES IN PRECONCEPTION,
PREIMPLANTATION AND PRENATAL GENETIC DIAGNOSIS
How will genetics technology drive the future?

September 25-27, 2015 | Paris, France

REGISTRATION AND ACCOMMODATION FORM

Please PRINT in BLOCK LETTERS and FAX, Email or AIRMAIL to:



Headquarters and Administration:

53 Rothschild Boulevard, PO Box 68,
Tel Aviv, 61000, Israel
Tel: +972-3-5666166
Fax: +972-3-5666177
E-Mail: cogen@comtecint.com

IDENTIFICATION

Please complete this section accurately. The information you provide will allow us to correspond with you efficiently.

Participant (Please TYPE or PRINT IN BLOCK LETTERS)

First Name Initials

Family name

Title: ☐ Prof. ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms.

MAILING ADDRESS ☐ Office ☐ Residence

Institute Dept.

No. Street Suite/Apt.

City State/Province Country Postal Code

Telephone (office hours): Country code/city code/number Fax: Country code/city code/number

E- Mail address

REGISTRATION FEES:

	Early Registration until July 25, 2015	Late Registration until August 25, 2015	From August 26, 2015 & On Site
Participants - Physicians and scientists	☐ € 540	☐ € 590	☐ € 640
Residents*, trainees, nurses, students	☐ € 415	☐ € 470	☐ € 510

*Trainees/Nurses and Students required documents

An official letter of the institution (PDF format) originally stamped and signed by the head of the department and confirming this status, must be sent by email when registering.

Registration fees include: Participation in scientific sessions, Congress bag containing the program, invitation to the welcome reception and coffee breaks as per the Congress program.



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Participant's Name _____

ACCOMMODATION

Please note that hotel accommodation is subject to availability, and cannot be guaranteed. Your Congress registration/accommodation will not be considered complete until payment is received.

HOTEL	Single Room	Double Room
Novotel Tour Eiffel Hotel Congress Venue	☐ € 191	☐ € 208
Rates quoted are per room, per night, including breakfast & VAT		

Check in Date

Check out Date

Total night/s

I will share my accommodation with:

Name

Cancellation Policy for registration:

All cancellations must be faxed, electronically mailed or postmarked. Refund of registration fees will be as follows :

Postmarked before July 25, 2015 - 100% refund (minus € 50 handling fee)

Postmarked from July 26, 2015 - 50% refund

No refund on cancellations sent after September 4, 2015

Cancellation policy for hotel reservation:

Cancellations or changes must be received in writing to 'Comtec'.

Cancellations received 4 months prior to arrival - full refund minus €50 handling fees.

Cancellations received 2 months prior to arrival – 50% refundable deposit.

Cancellations received less than 60 days prior to arrival - non refundable

In the event of a non-show, the hotel will automatically release the reservation, and payment will be non-refundable.

PAYMENT

Please indicate the amount enclosed and preferred mode of payment. Ensure that you send your fully completed registration and accommodation form together with your payment:

Registration Fees: € _____

Hotel Accommodation: € _____ per night X _____ total night = € _____

Total registration and accommodation: € _____

Option 1: Credit Card

☐ Visa

☐ MasterCard

☐ Diners

☐ American Express

Number

Expiry Date (month/year)

Name as Shown on Card

* Security Code

* Security Code:

Visa and MasterCard Users - Your 3-digit security code is on the back of your card and follows the 16-digit number on the white strip.

American Express Credit Card Users - Your 4-digit security code is on the front of your card just above your credit card number.

Option 2: Bank Transfer – with your name and address indicated on the reverse. If payment is made for more than one person or by a company, please make sure all names are indicated. Please send fully completed registration and accommodation forms together with a copy of the bank transfer.

Please make drafts payable to: Comtec Congresses Management Ltd., Bank Hapoalim, Kikar Drachten, Kiriat Ono, Israel.

Branch number: 656; account number: 468440; SWIFT Code: POALILIT; IBAN: IL11 0126 5600 0000 0468440

Bank charges are the responsibility of the payee and should be paid at source in addition to the registration and accommodation fees.

LIABILITY

The Congress Organizers cannot accept liability for personal accidents or loss of or damage to private property of participants either during or directly arising from the 1st Meeting on Controversies in preconception, preimplantation and prenatal genetic diagnosis: How will genetics technology drive the future? (CoGEN). Participants should make their own arrangements with respect to health and travel insurance.

Date

Signature



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