



The XII Annual Meeting of the Mediterranean Society for
Reproductive Medicine (MSRM) &
The World Congress on Building Consensus out of Controversies
in Obstetrics, Gynecology & Infertility (COGI)



April 24-26, 2014 | Barcelona, Spain
www.comtecmed.com/MSRM

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: cogi-msrm@comtecmed.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



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REGISTRATION FEES

	EARLY REGISTRATION Until February 15, 2014	LATE REGISTRATION Until April 10, 2014	From April 10, 2014 & On-Site Registration
Participants - Physicians and Scientists	<input type="checkbox"/> € 490	<input type="checkbox"/> € 540	<input type="checkbox"/> € 590
Trainees*, Health Professionals & Students	<input type="checkbox"/> € 340	<input type="checkbox"/> € 390	<input type="checkbox"/> € 590
Participants from developing countries**	<input type="checkbox"/> € 290	<input type="checkbox"/> € 320	<input type="checkbox"/> € 590

MSRM/COGI Pre-Congress Workshops (Open for a limited number)

	Workshops Registration Only	Workshops & Congress Registration until Feb 15, 2014	Workshops & Congress Registration until April 10, 2014	Workshops & Congress Registration closed April 15, 2014
Workshop #1 Ovarian Stimulation 08:30-12:30	<input type="checkbox"/> € 150	<input type="checkbox"/> € 590	<input type="checkbox"/> € 640	<input type="checkbox"/> € 690
Workshop #2 How to Select the Best Embryo 08:30-13:30	<input type="checkbox"/> € 150	<input type="checkbox"/> € 590	<input type="checkbox"/> € 640	<input type="checkbox"/> € 690
Workshop #3 RBM Online Scientific Writing Workshop 14:00 – 17:00	<input type="checkbox"/> None	<input type="checkbox"/> € 490	<input type="checkbox"/> € 540	<input type="checkbox"/> € 590
Workshop #4 Hands-on Workshop Oocyte & Embryo Vitrification– The Cryotop- SC 09:00 - 17:00	<input type="checkbox"/> € 750	<input type="checkbox"/> € 1,240	<input type="checkbox"/> € 1,290	<input type="checkbox"/> € 1,340

Cancellation Policy for registration

All cancellations must be faxed, electronically mailed or post-marked. Refund of registration fees will be as follows:
 Postmarked before February 1, 2014 – 100% refund (minus € 50 handling fee).
 Postmarked from February 1, 2014 – 50% refund.
 No refund on cancellations sent after March 24, 2014



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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.

OFFICIAL CONGRESS HOTEL	SINGLE ROOM	DOUBLE ROOM
Princesa Sofia Hotel	<input type="checkbox"/> € 183	<input type="checkbox"/> € 200

Rates quoted are per room, per night, including breakfast and VAT, upon availability

As of November 1, 2012, a tourist tax should be paid directly paid by the guests to the hotels upon check out will apply to all hotels in Catalonia Region as follows:
 Barcelona City 5 Star Hotels - 2.50€ * per night. (maximum 7 nights). Barcelona City 4 Star Hotels - 1.25€ * per night. (maximum 7 nights).

Check in Date

Check out Date

Total night/s

I will share my accommodation with:

Name

Cancellation policy for hotel reservation:

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 no-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

Note: American Express and Diners Credit card payments (only) will be charged to your account in US\$ according to the rate of exchange to the Euro on the date of payment, all other credit cards will be charged to your account in Euro.

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, Kiriati 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 XII Annual Meeting of the Mediterranean Society for Reproductive Medicine (MSRM) & The World Congress on Building Consensus out of Controversies in Obstetrics, Gynecology & Infertility (COGI). Participants should make their own arrangements with respect to health and travel insurance.

Date _____

Signature _____