REGISTRATION FORM
Czech Republic

After the closing of the offer (12 April, 2012) the prices will stay as for all participants

PLEASE COMPLETE AND RETURN TO:
EADV Headquarters
Tel: +41 91 973 45 20
Via delle Scuole 12, E-mail: registration@eadvprague2012.org
CH – 6900 Lugano-Cassarate

PARTICIPANT INFORMATION
- Professor
- Dr.
- Mr.
- Mrs.
- Participant
- Accompanying person
- Company

<table>
<thead>
<tr>
<th>Family name</th>
<th>First name</th>
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<tbody>
<tr>
<td>Institute/Company</td>
<td>Home or Business address</td>
</tr>
<tr>
<td>Clinic/Department</td>
<td>Street &amp; No.</td>
</tr>
<tr>
<td>Postal Code/City</td>
<td>Country</td>
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<td>Tel.</td>
<td>Fax</td>
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<td>Email</td>
<td>Mobile</td>
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EADV Membership Nr. Please complete if you wish to register as an EADV Member

Speciality: (Please choose up to 3 areas of expertise)
- Aesthetics
- Immunodermatology
- Date of birth:
- Allergology
- Nutrition
- Nr of patients per month
- Cosmetic Dermatology
- Oncology
- I do not treat patients by myself
- Dermatopathology
- Ophthalmology
- <100 patients
- Endocrinology
- Paediatric Dermatology
- 100 to 250 patients
- General Practice
- Plastic Surgery
- 250 to 350 patients
- Gerontology
- Venereology
- > 350 patients
- Gynaecology
- Others

Your private practice concerns

How much time (in %) do you spend in your private practice on:
- Aesthetic activities in majority
- No private practice
- Dermatology activities in majority
- Patient treatment private practice
- Plastic surgery
- < 50%
- > 50%
- Aesthetic & Dermatological activities
- Patient treatment hospital
- < 50%
- > 50%

ACCOMPANYING PERSON INFORMATION

<table>
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<tr>
<th>Family name</th>
<th>First name</th>
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**REGISTRATION FEE (VAT included)**

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<tr>
<td>Participant</td>
<td>Euro 100.</td>
</tr>
<tr>
<td>Accompanying Person</td>
<td>Euro 140.</td>
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</table>
Having signed below, I herewith confirm that I have read and I am fully aware of the cancellation conditions. I hereby accept all registration conditions of the Congress and agree to the payment corresponding to my request.

**IMPORTANT NOTE:**

E-mail registrations will be accepted only with attached current Registration Form.

Payments by cheque or purchase order cannot be accepted. Please understand that confirmation of registration and/or booked services can only be issued on the basis of full pre-payment.

**INVOICE INFORMATION**

In case your firm/institution is covering the registration fee:

Institution/Company...........................................................................................................................................................................................................................................

Address......................................................................................................................................................................................................................................................................

City .......................................................... Postal code. ....................... Country ..........................................................................................................................................................................................

Phone ........................................ Fax ................................. E-mail ..........................................................................................................................................................................................

**GENERAL CONDITIONS FOR REGISTRATION**

Registration will be confirmed upon complete payment of the registration fees. **Deadline for registration with special fee is 12 April, 2012.**

Should the payment be received thereafter, the full current fee will be applied.

**CANCELLATION CONDITIONS:** in case of cancellation of participation before **13 April, 2012**, fees will be refunded deducting a handling fee of 25,00 EUR per person. After that date there will be no refund whatsoever.

Name changes will be charged with 20,00 EUR per registration. Should you have any special request for the processing of your invoice, kindly let us know when returning your registration form. For the rewriting of the invoice 20,00 EUR will be charged. Prices of sub-contractors are based on the current tariffs and VAT rate. All prices and details are subject to changes beyond our control.

These general conditions and all administrative information are to be considered as the legal basis for all reservations.

A verbal agreement is not binding, unless confirmed in writing.

**Use of Data - Authorisation**

The data made available through this form are gathered and treated by the EADV in compliance with the Swiss regulation on data protection, in particular in compliance with Sec. 4 of the Swiss Federal Law of June 19, 1992 on data protection. All data are treated by the EADV only for organisational purposes, in particular for the registration to congresses and/or symposia as well as for the monitoring of credits for the Continued Medical Education of the participants.

At any congress and symposium each participant receives one badge carrying the family name and the first name of the participants as well as bar code. Through the bar code all data on this form can be accessed through software at the sole disposal of EADV. Each participant shall consider that by accepting any scanning of any badge at any stand at the congress or symposium, the participant gives his / her authorisation to the EADV to transfer to the holder of the stand (usually a pharmaceutical company) the data of the participant regarding his / her postal address and e-mail, including the authorisation to use said data for commercial purposes such as the marketing of pharmaceutical products and similar.

I/We accept your general information and conditions

Signature .................................................................................................................. Date..................................................................