



The 32nd Annual Meeting of the European Society for Paediatric Infectious Diseases
Ireland, Dublin May 6 –May 10, 2014

GROUP REGISTRATION POLICY AND FORM

The group registration process is valid for a minimum of 10 delegates or more.

In order to facilitate your group registration, please complete this form together with the payment and return by fax to **ESPID 2014 Registration Department**, fax: +41 22 9069140 or E-mail to: ogilboa@kenes.com

In order to benefit from the early registration fees, please ensure the signed form and payment is received **before March 5, 2014.**

At this stage the name list of delegates is not required; you are welcome to register your group by stating number of participants only and send us the **FINAL names** no later than **March 15, 2014**; please do not send preliminary name lists.

Name changes (up to 15% of total participants) will be permitted free of charge until **April 22nd, 2014**; after this date, any name change will be subject to EUR 20 charge per name.

On site Pre-Registration pick up for groups will be available upon request; Groups' representatives are welcome to coordinate a personal meeting with Ms. Orna Gilboa. At this meeting you will receive the registration kits, bags and meeting material. We recommend booking this meeting before **April 11th, 2014.**

Payment is accepted by credit card or bank transfer. Credit card payment is subject to additional 4% commission.

Cancellation policy:

- Cancellations received up and including March 12, 2014 – full refund.
- Cancellations received Between March 13th – April 30th - 50% will be refunded.
- From May 1, 2014 – no refund will be made.

Fees for all Participants include:

- Attendance to all scientific sessions
- Delegate's bag with Meeting's material
- Refreshments during the meeting
- Opening Ceremony and Get Together Reception
- Bill Marshall Award and Lecture

Company Name _____ Signature _____, Date _____.

Group registration form

Registration Fees

	Early Bird Until March 12 th , 2014	Regular March 13 th -April 30, 2014	Onsite After April 30, 2014
ESPID Member*	€130	€240	€350
Non Member	€550	€670	€750
Student/Resident/Trainee **	€60	€120	€180

* **ESPID MEMBER:** in order to apply for this category, please ensure the membership is approved and fees are paid for 2013 before you mention the number of members you have in the group. Registration will not be confirmed otherwise.

** **STUDENTS/RESIDENTS/FELLOWS/TRAINEES:** an official supportive letter stamped and signed and by the head of the department and confirming this status must accompany the registration form.

Group Registration details:

Required category: _____ No. of registrations required: _____

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Pharmaceutical company name: _____

IMPORTANT!

If applying for the **ESPID member category, please write below the full name of the member and his membership number*

This form was submitted by:

Company name: _____.

Contact person: _____.

VAT number (**mandatory**): _____

Chosen payment method (Bank transfer/VISA/AMEX/MC) _____

Signature _____

Date _____