3rd Vienna Symposium on Surgery of Peripheral Nerves
March 19-21, 2010
General Hospital Lecture Halls, Vienna, Austria

REGISTRATION FORM

Please fill in block letters and send or fax it back until **March 10, 2010** to:
Vienna Medical Academy **c/o PNS 2010**, Alser Straße 4, 1090 Vienna, Austria
T: +43 1 405 13 83 32, F: +43 1 407 82 74, E-Mail: pns2010@medacad.org

Online Registration:
www.medacad.org/pns2010/

Personal Data:

Title:_____ First Name: _____ Name: _____

Institution/University: _____

Department:_____

Street: _____

Country: _____ Code: _____City: _____

Tel:_____ Fax: _____

E-Mail: _____

Registration Fees:

Payment received	by January 18, 2010	after January 18, 2010
Regular Fee	☐ € 350	☐ € 400
Trainees*	☐ € 250	☐ € 300
Social Programme **Schönbrunner Palace Concert** **Saturday, March 19, 2010**	☐ € 60 p.p.	

*   Surgeons in training may request a reduced congress fee by sending a short CV and a letter of
      certification by their head of department.
**   Registration and payment is mandatory in advance!

Social Programme:

☐ Friday, March 19, 2010:
   Welcome Reception – General Hospital Vienna, 18.30 hrs   Person(s): _____
   (No Fee, but registration is mandatory in advance)

☐ Saturday, March 20, 2010:
   Schönbrunner Palace Concert, 20.30 hrs   Person(s): _____
   (Registration and payment is mandatory in advance)

Total Amount: € _____

Cancellation and refunds:
Notice of cancellation must be made in writing, by registered letter or fax, to the congress office. Registration fees to be refunded
as follows: through February 22, 2010: 50% refund, after February 22, 2010: no refund

Payment modalities:
Please credit the amount until **March 10, 2010** or pay on site.

☐ Bank Transfer: To the congress account at ERSTE Bank "PNS 2010" **(free of charge for the beneficiary!)**
   Code: 20111, Account No.: 28036580352, VMA c/o PNS 2010, SWIFT/BIC: GIBAATWW, AT802011128036580352

❑ Credit card   ❑ Visa   ❑ MasterCard   ❑ Diners Club

   Card no: ..../..................../................../.................CVV2/CVC2 Code*:____Expiry Date: _____

   Name of Cardholder: _____ Signature: _____

   Date: _____

* The **CVV2/CVC2** is a 3-digit security code printed on the back side of your card. The number appears in reverse italic at the top right end of the signature panel behind the
last 4 digits of your card number. This helps us to fight fraud in the "card-not-present transactions". Thank you!

Deadline for Registration: March 10, 2010