

15th EVDI Annual Scientific Conference
July 20th – 24th, 2010 in Giessen, Germany



Registration & Hotel Reservation

Please return to the congress office:

CSM, Congress & Seminar Management
 Industriestr. 35
 GERMANY - 82194 Groebenzell

For more information please contact CSM:

E-mail: info@csm-congress.de
 Fax: ++49- 81 42 - 5 47 35
 Phone: ++49- 81 42 - 57 01 83
 Internet: www.evdi2010.de

Mr. Ms. Title _____

Family Name
Institution
Street / Post Box
Country
Telephone-No.

First Name
Department
City Code / City
E-mail
Fax-No.

Conference Registration
includes:

- scientific program & abstracts
- drinks and snacks during breaks
- Welcome reception on Wednesday evening
- Excursion on Thursday afternoon
- Dinner on Friday evening
- Gala dinner on Saturday evening

Conference Registration	Registration and Payment		Total
	until May 31 st , 2010	from June 1 st , 2010	
Member ECVDI / EAVDI	() 550 Euro	() 600 Euro	
Non-Member	() 700 Euro	() 750 Euro	
Resident ECVDI	() 300 Euro	() 350 Euro	
Seminars on Tuesday, July 20th			
S1: Interpr. of thoracic radiographs (14:30-18:30)	() 200 Euro	() 250 Euro	
S2: CT of the thorax (9:00-13:30)	() 200 Euro	() 250 Euro	
S3: MRI of the brain (8:00-12:30)	() 200 Euro	() 250 Euro	
S4: MRI of the spine (13:30-18:00)	() 200 Euro	() 250 Euro	
S5: Exotic companion animals (9:00-13:30)	() 200 Euro	() 250 Euro	
S6: Equine distal limb (14:30-18:15)	() 200 Euro	() 250 Euro	
S7: Ultrasonography (8:00-15:30)	() 400 Euro	() 450 Euro	
Resident Forum on Wednesday, July 21st	() 50 Euro		

Accompanying person (no admission to the scientific program)

Family Name	First Name	
Welcome reception & excursion & dinner on Friday	() 125 Euro	
Gala dinner on Saturday evening	() 75 Euro	

SUM

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Payment:

CSM will issue a detailed confirmation after the receipt of your payment.

Registration Fee EUR

Bank Transfer

CSM, C. Schroettenhammer
 HypoVereinsbank München
 Bank Code 700 202 70 Account 46 58 51 00
 IBAN: DE 6370 0202 7000 4658 5100 / SWIFT-BIC: HYVEDEMMXXX

- Please remit your payment in Euro.
- All bank fees must be covered by the sender.
- Please indicate the name of the participant and the code: EVDI

Credit Card [] MASTER [] VISA [] AMEXCO

Card No. _____ Expiration Date _____ Verification No. _____

Cardholder's Name _____ Signature _____

Terms of Registration:

All cancellations must be made in writing to the congress office CSM.
 For cancellations received by May 31, 2010 a refund minus a handling fee of 50,00 € will be granted.
 No refunds can be made after that date. Name changes will be effected free of charge.

Hotel Reservation:

CSM has reserved rooms in different hotels in Giessen.
 All hotels are within walking distance from the conference venue.
 Prices are quoted per room, per night **incl. breakfast** and VAT.

Hotel	single room	double room
First Class	() 105 – 110 Euro	() 127 – 132 Euro
Middle Class	() 82 – 85 Euro	() 102 – 110 Euro
Standard Class	() 57 – 65 Euro	() 76 – 85 Euro

arrival date: _____ **departure date:** _____

Remarks: _____

Terms of Booking

The hotel reservation service is free of charge for all participants.
 Each hotel reservation must be guaranteed by a credit card.
 Accommodation including all incidentals should be paid directly at the hotel.
 CSM is making the reservation on your behalf. Therefore the contract is effected between the guest and the hotel.
 In case of late cancellations the hotels are allowed to charge cancellation fees for each cancelled room / night which cannot be sold to another guest. In case of any changes or cancellations please inform CSM immediately.
 CSM will charge a processing fee of 15,00 EURO per cancelled room.

The hotel reservation will be guaranteed by the credit card mentioned above.

The hotel reservation will be guaranteed by the following credit card:

Card-No: _____ Exp.Date: _____ Card Verification-No: _____

Cardholder's Name: _____ Signature: _____

The conditions of this registration are hereby fully accepted:

Date _____ Place _____ Signature _____