

SPECIAL RATE FOR ECR 2016

Exclusively available for participants
of the Kongres radiologa Srbije
November 6 – 8, 2015
Belgrade, Serbia



REGISTRATION FORM FOR ECR 2016, March 2 – 6

Title: Gender: Male Female

First Name*: **Last Name*:**

Date of birth*:

Department:

Hospital / Institute:

Street/ no:

ZIP Code: **City*:** **Country*:**

Phone: Fax:

e-mail*:

***required**

Registration details:

(all prices include 10% VAT)

-
- | | |
|---|-------|
| <input type="checkbox"/> Reduced Radiologist / Medical doctor / Physician | € 250 |
| <input type="checkbox"/> Reduced Resident / Radiographer | € 150 |

*The age limit for residents is 35 years (incl. the age of 35).

Residents and radiographers have to present a document confirming their professional status or send a copy to registration@myesr.org. This document has to be written on hospital paper and must be signed by the head of department.

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Payment details:

Please note that the payment can only be completed by credit card.

Eurocard/Mastercard Visa

Credit card

Credit Card Number:

Expiry date:

CVC:

Name of Cardholder: _____

Date: _____ Signature: _____

My signature certifies that I accept the terms and conditions of ECR 2016 (to be found at www.myESR.org).

IMPORTANT INFORMATION:

Kindly note that this is a special reduced offer only available if the completed registration form is sent to the ESR office by November 13, 2015 at the latest, either per e-mail to registration@myesr.org or to the fax number +43-1-5334064-444.

Once the registration is completed or a regular registration has been completed beforehand, there will be no possibility of a refund.