

Vascular and Endovascular Controversies Update

incorporating the Global Endovascular Forum

Venue: **Sherfield Building, Imperial College School of Medicine, Exhibition Road, London SW7 2AZ, UK**

PARTICIPANT INFORMATION (BLOCK CAPITALS)

Last Name _____ First Name _____ Title _____
 Institution or Company _____
 Address _____
 Post code _____ City _____ Country _____
 Email (please write clearly) _____
 Telephone _____ Mob/Cell _____

SPECIALTY

Vascular Surgeon Interventional Radiologist Vascular Biologist Vascular Physician
 Vascular Tech/Nurse Interventional Cardiologist Nephrologist Transplant Surgeon Endocrinologists
 Neurologists Podiatrists Diabetologists Wound Care Specialists Orthopaedics
 Dermatologists Plastic Surgeons Industry Participant Other (please specify) _____

THIS RATE INCLUDES ENTRY TO ALL CX EVENTS

<input type="checkbox"/> Full registration (includes symposium book) £825 / €945 Special rate £695 / €775 £€.....	<input type="checkbox"/> Junior doctor registration (includes symposium book) £495 / €590 Special rate £445 / €490 £€.....	<input type="checkbox"/> Vascular technologist/nurse (excludes symposium book) £195 / €225 Special rate £145 / €185 £€.....
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PLEASE SPECIFY DAY(S)

<input type="checkbox"/> 2 Day Rate (includes symposium book) £495 / €550 Special rate £445 / €490 £€..... Please specify day(s) <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday	<input type="checkbox"/> 1 Day Rate (excludes symposium book) £295 / €335 Special rate £270 / €295 £€..... Please specify day(s) <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday
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VASCULAR ACCESS COURSE/ VALVE TECHNOLOGY SYMPOSIUM

<input type="checkbox"/> Standard Rate (Excludes entry to other CX Events and CX symposium book) £295 / €335 Special rate £270 / €295 £€.....	<input type="checkbox"/> Nurses Rate (Excludes entry to other CX Events and CX symposium book) £105 / €120 Special rate £95 / €105 £€.....
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- Special rates valid on applications received by 31 January 2012. Rates inclusive of VAT. Euros accepted for payments by cheque, bank transfer and online registration.
- Lunch is included in the delegate fee
- Please note: At busy times access to the main auditorium will be restricted to the holders of a Full Registration. All other delegates will be able to watch and listen to the proceedings through CCTV in one of the lecture theatres.
- Credit card payments received via mail or telephone will be processed in GBP and debited in Euros at the current rate of exchange.
- Cancellation Policy: Cancellation prior to 9th March 2012 will be subject to a 20% administration charge. We regret that refunds after this date will not be available.

Please specify which of these events you wish to include in your registration

CX Vascular Revision Course	Saturday 14th April	<input type="checkbox"/>	CX Office Based Vein Practice	Monday 16th April The course will be held twice, at 10.00am and repeated at 2.00pm. <input type="checkbox"/> 10.00am <input type="checkbox"/> 2.00pm
CX Vascular Imaging Course	Saturday 14th April	<input type="checkbox"/>	CX Diabetic Foot Ulcer Management	Monday 16th April
CX St George's Valve Technology (2 days)	Saturday 14th April & Sunday 15th April	<input type="checkbox"/>	CX St George's Vascular Access Course (2 days)	Monday 16th April & Tuesday 17th April
Linc @ CX	Sunday 15th April	<input type="checkbox"/>	CX EVEREST Simulation Course	Tuesday 17th April
CX Innovation Showcase	Sunday 15th April	<input type="checkbox"/>		

PAYMENT Total Payment Due £.....

Credit card: Please charge my credit card with the amount in the **Total Payment Due** section above
 Card type: VISA / MASTERCARD / DELTA / MAESTRO (UK ONLY) / AMEX Please specify _____ (Switch only)
 Card number _____ Expiry date _____ 3 digit security code _____ Issue no _____
(on back of card) (4 digits for Amex)
 Cardholder's name _____ Cardholder's signature _____

Payment by cheque enclosed: Please make cheque in GBP or Euros payable to BIBA MEDICAL LTD
 Payment by bank transfer: If paying by bank transfer the money must be received before 1 April 2012

Sterling GBP: Account No: 01148583
 Account name: **BIBA Medical Ltd**
 Sort code: 40-02-35
 IBAN No: GB30MIDL40023501148583 Swift Code: MIDLGB22
 Address: HSBC, 357 Upper Richmond Road West, London SW14 8QW, UK
 Please include a copy of your bank transfer. Quote your surname as reference.

Euro Account No: 57091122
 Account name: **BIBA Medical Ltd**
 Please pay to: **MIDLGB22** (HSBC Bank plc Swift address)
 in favour of IBAN Number:
GB73MIDL40051557091122
 Please include a copy of your bank transfer
 Quote your surname as reference.