

Vascular and Endovascular Consensus 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 _____ Fax _____

SPECIALTY Vascular Surgeon Interventional Radiologist Vascular Biologist Industry Participant
 Vascular Physician Interventional Cardiologist Vascular Tech/Nurse Other _____

SYMPOSIUM REGISTRATION

This rate includes entry to all CX events

Please specify day(s)

Charing Cross Symposium
 Saturday 9 April –
 Tuesday 12 April

Full registration
 (includes symposium book)
 £795 / €900
Special rate
 £675 / €740
 £
 €

Junior doctor registration
 (includes symposium book)
 £495 / €590
Special rate
 £445 / €490
 £
 €

Vascular technologist/nurse
 (excludes symposium book)
 £195 / €225
Special rate
 £145 / €185
 £
 €

2 Day Rate
 (excludes symposium book)
 £495 / €550
Special rate
 £445 / €490
 £ €
 Please specify day(s)
 Saturday Sunday
 Monday Tuesday

1 Day Rate
 (excludes symposium book)
 £295 / €335
Special rate
 £270 / €295
 £ €
 Please specify day
 Saturday Sunday
 Monday Tuesday

- Special rates valid on applications received by 31 January 2011. Rates inclusive of VAT. Euros accepted for payments by cheque, bank transfer and online registration.
- 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 2011 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 9th April

CX EVEREST Simulation Course Saturday 9th April

CX Vascular Imaging Course Saturday 9th April

Linc @ CX Sunday 10th April

CX Innovation Showcase Sunday 10th April

CX Office Based Vein Practice Monday 11 April The course will be held twice, at 10.00am and repeated at 2.00pm.
 10.00am 2.00pm

CX St George's Vascular Access Course (2 days) Monday 11th April & Tuesday 12th April

ilegX (2 days) Monday 11th April & Tuesday 12th April

LUNCH Lunch is included in the delegate fee Please tick if vegetarian

PAYMENT

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

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 2010

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.

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Last Name _____ First Name _____ Title _____
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 Address _____

 Post code _____ City _____ Country _____
 Email (please write clearly) _____
 Telephone _____ Fax _____

HOTELS

Occupancy required	Single <input type="checkbox"/>	Double <input type="checkbox"/>	Breakfast	
Main Faculty Hotels	Please number Order of preference			
Millennium Gloucester Hotel	Fully booked	£155.00	£167.00	Included
Millennium Bailey's Hotel	<input type="checkbox"/>	£155.00	£167.00	Included
Grange Strathmore Hotel	<input type="checkbox"/>	£110.00	£132.00	Included
Rembrandt Hotel	Fully booked	£161.00	£161.00	Included
Regency Hotel	<input type="checkbox"/>	£152 Clubroom £133 Standard Room	£162 Clubroom £143 Standard Room	Included Included
Best Western Cromwell Hotel	<input type="checkbox"/>	£123.00	£138.00	Included
Holiday Inn (Forum)	<input type="checkbox"/>	£148.00	£158.00	Included
Royal Lancaster	Fully booked	£151.00	£165.00	Included
Crowne Plaza	<input type="checkbox"/>	£179.00	£189.00	Included
The Kensington Hotel	<input type="checkbox"/>	£183.00	£193.00	Included
The Radisson Edwardian Hotel	<input type="checkbox"/>	£148.00	£189.00	Included

All rates are inclusive of VAT 20%.
 All hotel rooms are held against your credit card and must be paid for on departure.
 All hotels are 10-15 minutes walk from Imperial College

BOOKING DETAILS

Arrival date _____ Departure date _____
 Number of nights _____ Rate per night £ _____ Total due £ _____
based on first preference
 Smoking room preferred Non smoking room subject to availability

PAYMENT

Hotel reservations can only be confirmed with a valid credit card to guarantee the booking.
Confirmed reservations must be cancelled directly to the hotel 24 hours prior to arrival to avoid being charged.

Credit card: I authorise the hotel to debit my credit/debit card with the **Total due** amount above

Card type: VISA / MASTERCARD / DELTA / SWITCH / AMEX Please specify

Card number _____ Expiry date _____ 3 digit security code _____ Issue no _____
(on back of card) (4 digits for Amex) (Switch only)

Cardholder's name _____ Cardholder's signature _____