



GROUP REGISTRATION FORM

1. The group registration process is valid for a **minimum of 10 delegates**.
2. In order to facilitate your group registration, please fill out this form and return by email to: reg_ecim22@kenes.com
3. In order to benefit from the registration fees, payments must be paid **prior to the below deadlines**.
4. Please send the **final** name list no later than **4 weeks prior to the Congress**. Please do not send preliminary name lists.
5. Name changes will be permitted free of charge until **2 weeks prior** to the Congress (up to 15% of the participants names). After this date, any name change will be subject to 30 EUR charge per name.
6. Payment is accepted by credit card or bank transfer. Credit card payment is subject to **additional 4% commission**.
7. **Cancellation policy**: Refund of registration fee will be as follows:
Note! Refunds for groups will be processed after the Congress.
 - Cancellations received until and including April 27, 2022 – full refund.
 - Cancellations received between April 28 until May 23, 2022 – 50% will be refunded.
 - From May 24, 2022 – no refund will be made.
8. **Fees for all Participants include**:
 - Participation in all scientific sessions.
 - Welcome Reception.
 - Entrance to the Exhibition
 - Refreshments as per times indicated in the program.
 - Printed Conference materials.
 - Certificate of attendance (sent via email after the conference)

Please fill in the below information:

Company (Group Name): _____

Booking Agency (if relevant): _____

Contact Person: _____

Email: _____

REGISTRATION CATEGORIES

Registration Fees (EUR)

Fees apply to payments received prior to the indicated deadline.

REGISTRATION CATEGORIES	EARLY DEADLINE UNTIL 26 APRIL, 2022	REGULAR DEADLINE FROM 27 APRIL, 2022
Non-Members	€ 450	€ 525
EFIM Member*	€ 400	€ 475
Young Internist**	€ 250	€ 300
Fellow	€ 250	€ 300
Pre-Congress Workshops		
Pre-Congress Workshop 01-05	€ 0	€ 0
Pre-Congress Workshop 06 - Ultrasound 1 session***	€ 35	€ 35
Pre-Congress Workshop 06 - Ultrasound 2 sessions***	€ 65	€ 65
Pre-Congress Workshop 06 - Ultrasound 3 sessions***	€ 80	€ 80

* Members are required to indicate the relevant Society in their registration form.

** In order to register under these categories, an official document to verify your status must be uploaded during the online registration process. Young Internists must send proof of age (up to 35 years old) – Copy of identity card is required.

*** Registration to the Ultrasound workshop is available during your registration process.

Group Registration Details:

Pharmaceutical company name - _____

1. Required registration category: _____ No. of Registrations: _____

2. Required registration category: _____ No. of Registrations: _____

3. Required registration category: _____ No. of Registrations: _____

Total Group Participants: _____

Important Note: Abstract Presenters

In case there are Abstract Presenters among the group delegates please advise the names and abstract numbers in advance in order to guarantee the abstract will remain in the Scientific Programme.

Please mark below accordingly:

- There are no abstract presenters in this group
- Attached is a list of the abstract presenters in this group

Data Protection:

- I confirm that prior to transferring Kenes the group delegates contacts, our company has obtained consent from the individuals concerned.**

PAYMENT DETAILS

Payment information:

Billing Address (to appear on invoice and receipt): _____

VAT number: _____

This form was submitted by:

Full Name: _____

On Behalf of (company name): _____

Signature: _____ Date _____

Please select a method of payment (credit card or bank transfer):

1. Credit card payment (Credit card payment is subject to additional 4% commission):

I authorize 'KENES International – Organizers of Congresses' to charge the below credit card for the amount of:
_____ EUR.

Type: Visa / MasterCard / AMEX

Number: _____

Expiration date: _____

Name of Card holder: _____

Signature of Card Holder: _____

2. Bank Transfer Payment:

- Please ensure that the name of the group/paying company is stated on the bank transfer.
- Bank charges are the responsibility of the payer and should be paid at source in addition to the registration fees.

Please make drafts payable in EUR only to:

Account name: ECIM 2022 Congress , Málaga
Bank details: Rue François-Versonnex 7, 1207, Geneva, Switzerland.
Swift code: CRESCHZZ80A
IBAN number: CH76 0483 5150 0934 9235 7
Account holder: KENES International