

cGMP 2011
 5th International Conference on cGMP
 Generators, Effectors and Therapeutic Implications
 HALLE (Saale) / Germany, June 24-26, 2011

Please complete this form in block letters or typewritten and return it to:
 GKV mbH - cGMP Registration Office
 PO Box 10 06 19 - D 63006 Offenbach
 Phone +49-69-829794-13 Fax +49-69-829794-33 Email cgmp@gkv-touristik.de

DEADLINE FOR EARLY REGISTRATION - February 18, 2011

DEADLINE FOR REGISTRATION - April 15, 2011

REGISTRATION FORM

Participant Information	
Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/>	Date of birth _____
Family name _____	First name _____
Institution _____	Department _____
Street _____	Country _____
City _____	Phone _____
ZIP code _____	Fax _____
Email :	

Registration Fee			
<u>registration fee includes arrangements as outlined on the congress website</u>			
	before Feb. 18	before April 15	
registration fee	€ 500,00	€ 600,00	€ _____
reduced STUDENTS fee	€ 370,00	€ 450,00	€ _____
accompanying persons, fee includes:			
- Welcome Reception June 24,			
- guided city walk June 25			
- Award Dinner ceremony June 26	€ 250,00	€ 250,00	€ _____
single day ticket - I wish to book a day ticket for June _____		€ 150,00	€ _____
no participation in award dinner or sightseeing included			
3 nights accommodation June 24-27, 2011	€ 267,00	€ 267,00	€ _____
additional overnight	€ 89,00	€ 89,00	€ _____
Please indicate dates for add. nights: Arrival: June _____, 2011 Departure: June _____, 2011			
Total amount			€ _____
<u>Group registration:</u> If you are going to register 4 or more delegates/students <u>at the same time</u> from the same laboratory, a reduction will be given. Please contact the registration office and ask for applicable reductions (will be given depending on the number of participants you will register and the date of the registration).			
The accommodation rates are based on single occupancy and include breakfast and VAT. Please note that hotel accommodation is subject to availability, and cannot be guaranteed. Your Congress registration/ accommodation will not be considered complete until payment is received. If you would like to book a double room, please contact the registration office regarding costs & availability.			
All cancellations must be faxed, electronically mailed or post-marked. Refunds will be as follows: Received by the registration office before April 15, 2011 - 100% refund of registration & accommodation fee (minus € 50,- handling fee) Received by the registration office before June 03, 2011 - 50% refund of registration fee, no refund of accommodation fee Cancellations received after June 03 will be non-refundable for both registration and accommodation fees.			

cGMP 2011
5th International Conference on cGMP
Generators, Effectors and Therapeutic Implications
HALLE (Saale) / Germany, June 24-26, 2011

Please complete this form in block letters or typewritten and return it to:
GKV mbH - cGMP Registration Office
PO Box 10 06 19 - D 63006 Offenbach
Phone +49-69-829794-13 Fax +49-69-829794-33 Email cgmp@gkv-touristik.de

DEADLINE FOR EARLY REGISTRATION - February 18, 2011

DEADLINE FOR REGISTRATION - April 15, 2011

Participant 's Name _____

page 2

Payment - payable in Euros to GKV -cGMP Registration office (account holder)

Please indicate the total amount to be charged and preferred mode of payment.

Total amount to be charged: € _____

BANK TRANSFER (accepted till April 15th)

IBAN : DE 51 5056 1315 0303 2888 70 BIC: GENO DE 51 OBH
VVB MAINGAU ; Seligenstaedter Str. ; D 63179 Obertshausen
Account holder : GKV-cGMP

For payments within Germany: BLZ: 505 613 15, Kontonr: 303288870, Bank: VVB Maingau

CREDIT CARD PAYMENT

American Express

Visa

Mastercard

Card Number _____

(please include the 3 or 4 digit security code (CVC) which is mostly printed on the back of your cc !)

Date of exp. _____

Cardholders name _____

_____ (signature of cardholder mandatory for cc payment)

Liability

The Congress Organizers cannot accept liability for personal accidents or loss or damage to private property of participants either during or directly arising from the 5th International Conference on cGMP.

I hereby accept the conditions of registration outlined

Signature

Date