



7 LAKES PROTEOGLYCANS conference

Varese, Italy, 10th - 14th September 2017

REGISTRATION FORM

Please return this form to the Congress Organizing Secretariat
OIC srl – Professional Congress Organiser
Viale Matteotti 7, 50121 Florence, Italy – by **28 August 2017**
Phone +39 (055) 50351, fax +39 (055) 5035230, e-mail registrationpg@oic.it

MAIN PERSONAL INFORMATION

Please complete this form for **ONE** participant in block letters.

Last name _____ First name _____

Home Address _____

Postalcode _____ City _____ Country _____

E-mail _____

Telephone _____ Fax _____

BILLING INFORMATION

Codice Fiscale (mandatory for Italian participants only) _____

Date, City and Country of birth (mandatory for foreign participants) _____

I accept to receive the invoice: by e-mail as a PDF file - or - hard copy by post

REGISTRATIONS

The latest date for pre-registration is **28 August 2017**. After this date, please register on site.

REGISTRATION FEES (VAT included)	REGULAR Registration by 30 June 2017	After 30 June and ON-SITE Registration
<input type="checkbox"/> PARTICIPANT	€ 650.00	€ 750.00
<input type="checkbox"/> RESIDENTS / PHD STUDENTS[§]	€ 300.00	€ 400.00
<input type="checkbox"/> CONGRESS DINNER <i>- 13 September first come first served basis</i>	€ 100.00	€ 120.00
<input type="checkbox"/> GRAND TOUR MILAN - Half day tour (PM) OPTION 1 - Guided walking tour of Milan - 12 September		€ 65.00
<input type="checkbox"/> GRAND TOUR MILAN - Half day tour (PM) OPTION 2 - Guided walking tour of Milan + Guided visit to The Last Supper 12 September		€ 80.00
<input type="checkbox"/> GRAND TOUR MILAN - Half day tour (PM) - OPTIONAL DINNER IN MILAN 12 September *		€ 60.00
<input type="checkbox"/> Shuttle Bus on 10 September ** - Time Schedule: hrs 11.00 / 14.00 / 18.00		€ 35.00
<input type="checkbox"/> Shuttle Bus on 14 September *** - Time Schedule: hrs 7.00 / 14.00		€ 35.00

Food allergy: _____

[§] Application for Residents/PhD Students should be certified by a letter of proof from the training program director and sent by fax (+39 055/5035230) or e-mail: registrationpg@oic.it

* This Dinner can be reserved only in addition with Grand Tour Milan Option 1 or Option 2.

** Price per person, from Malpensa Airport to Congress Venue. The service will be confirmed with a minimum of 25 people.

*** Price per person, From the Congress Venue to Malpensa Airport. The service will be confirmed with a minimum of 25 people.

Please note that tours' prices are based on a minimum of 25 participants.

Further details about accompanying person fee, tours and shuttle buses are available on the Social Program section on www.proteoglycans2017.org.



7 LAKES

PROTEOGLYCANS conference

Varese, Italy, 10th - 14th September 2017

Please repeat your Surname _____ Name _____

HOTEL RESERVATION

Room reservations can only be processed once the deposit has been received. Balance is required **by 30 June 2017**. For requests of reservations received **after 30 June 2017** the full prepayment will be required. The indicated room/night rates and availabilities are only applicable for reservations received by **5 May 2017** at the latest, after this date the Organizing Secretariat OIC can not guarantee any reservation even though all efforts will be made to satisfy the requests upon availability.

Prices in euro, including breakfast and VAT.

HOTEL CATEGORY	Room	Price per room, per night	Nights	Deposit per room	TOTAL
<input type="checkbox"/> ATAHOTEL VARESE **** (Conference Venue)	<input type="checkbox"/> double for single use <input type="checkbox"/> double	€ 120.00 € 135.00	_____	€ 250.00 (€ 25.00 handling fee included)	€ _____

Handling fee of € 25,00 will be applied for each room reserved.

Nr. _____ Double room(s) for single use
 Date of arrival _____ September 2017
 Length of stay _____ nights
 Arrival after 18.00 hrs yes no

Nr. _____ Double room(s)
 Date of departure _____ September 2017
 Smoking room Non-smoking room

SUMMARY

I herewith enclose the following amounts:

Registration Fee		€ _____
Congress Dinner - 13 September 2017		€ _____
Hotel Accommodation including € 25.00 for handling fee		€ _____
Grand Tour Milan - Option 1 - 12 September 2017	Nr. _____ Price _____	€ _____
Grand Tour Milan - Option 2 - 12 September 2017	Nr. _____ Price _____	€ _____
Grand Tour Milan - Optional dinner in Milan - 12 September 2017	Nr. _____ Price _____	€ _____
Shuttle Bus - 10 September	Nr. _____ Price _____	€ _____
Time schedule: <input type="checkbox"/> 11.00 <input type="checkbox"/> 14.00 <input type="checkbox"/> 18.00		
Shuttle Bus - 14 September	Nr. _____ Price _____	€ _____
Time schedule: <input type="checkbox"/> 07.00 <input type="checkbox"/> 14.00		

TOTAL TO BE PAID € _____



7 LAKES PROTEOGLYCANS conference

Varese, Italy, 10th - 14th September 2017

Please repeat your Surname _____ Name _____

PAYMENT

Please charge the following credit card:

For credit card payments will be applied the exchange rate with the local currency valid at the date of the withdrawal.

VISA

MASTERCARD

AMERICAN EXPRESS

Cardno. _____ Expirydate _____

Security code (last 4 digits on the front of the card, AMERICAN EXPRESS only) _____

Security code (last 3 digits on the back of the card, VISA and MASTERCARD only) _____

Cardholder's name _____

I hereby authorise the use of my credit card for the purposes specified above and, in case of hotel reservation, to charge the remaining balance **by 30 June 2017**.

_____ Date

_____ Signature

Payment by bank transfer:

Account name: OIC srl

Bank: Cassa di Risparmio di Firenze, Ag. 1, Viale Matteotti 20r, 50132 Florence, Italy

IBAN Code: IT39 S061 6002 8010 0001 0628 C00 - SWIFT Code: CRFiiT3F

No charges to the recipient.

A copy of the bank transaction has to be sent together with the registration form to OIC Srl by fax or e-mail.

The sender's full name and address must be clearly stated in the transfer order as well as the payment purposes.

IMPORTANT NOTICE

Registrations can be considered valid only after receipt of the payment. Forms without proof of payment will not be processed.

DECLARATION - According to the Italian Law Art.13 D.Lgs. 196/2003, I authorize OIC srl to use my personal and sensitive data only for purposes connected to the Congress management

I agree

I authorize OIC srl to use my data for marketing and commercial purposes, therefore to send me promotional and advertising messages and information about activities in connection to the Congress

I agree

I do not agree

_____ Date

_____ Signature