



Mainz, 8-9 February 2019

REGISTRATION AND HOTEL ACCOMMODATION FORM

Please send this form possibly no later than January 8th 2019 directly to:
OIC srl – Tel. +39 055 5035370 – Fax +39 055 570227 – registrationsmainz@oic.it
Please note that the organiser would prefer online registration at: www.eugs.org

MAIN PERSONAL INFORMATION Please complete this form for ONE participant in block letters.

Prof. Dr. Mr. Mrs. male female

Last name First name

Institution Unit, suite, floor

Postal Address

Postal code City Country

E-mail (*mandatory*)

Telephone Fax

Fiscal Code (*mandatory* for Italian participant only)

Date of birth (*mandatory*) City and Country of birth (*mandatory*)

BILLING ADDRESS (if different from postal address)

Please send receipt of payment/invoice to:

(address, zip code, city, country)

Fiscal License ID / VAT (**MANDATORY FOR COMPANIES**)

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

COURSE REGISTRATION

Registration fee: **€430,00** (*VAT included if applicable*)

REGISTRATION FEE FOR RESIDENTS INCLUDES: admission to scientific sessions, final programme, certificate of attendance, course documentation and name badge, coffee breaks, working lunches, social dinner on **February 8th, 2019**

Registrations from attendees of the previous editions are not allowed.

Registrations are limited exclusively to residents in ophthalmology, in training at the time of the registration; this must be certified by an official letter from the training programme supervisor.

Please note that Workshops in the afternoon are strictly reserved for Residents. Registrations in the afternoon Workshops are LIMITED and follow the principle "first come first served" until the full occupancy is reached.

Please describe any dietary restrictions or special needs

None Vegetarian Kosher Gluten-free Vegan

Other (please specify)



HOTEL ACCOMMODATION

Reservations will be confirmed by e-mail only upon receipt of the full pre-payment. The indicated room/night rates are only applicable for reservations made through Organizing Secretariat OIC, and received by January 8th at the latest; after this date, the Organizing Secretariat OIC cannot guarantee any reservation even though all efforts will be made to satisfy the requests upon availability

Please reserve as follows: N. Double room(s) for single use N. Double room(s)

Date of arrival Date of departure

Length of stay nights

Smoking room Non-smoking room

Arrival after 18.00 hrs yes no

| HOTEL | Single Room | Double room for single use | Double room | Total pre-payment |
|---|-------------|-----------------------------------|-----------------------------------|-------------------|
| <input type="checkbox"/> NOVOTEL MAINZ **** | | <input type="checkbox"/> 145,00 € | <input type="checkbox"/> 165,00 € | € |
| Booking fee | | | | € 25,00 |
| TOTAL Hotel Reservation | | | | € |
| | | | | |

Prices in euro, per room per night including breakfast and 10% Italian VAT.

Booking fee: € 25,00 (VAT included if applicable) per each booked room.
All choices will be confirmed upon availability.

CANCELLATIONS AND REIMBURSEMENT FOR REGISTRATION:

For cancellations received before January 8th 2019 50% refund will be possible.
No refund is processed for cancellations received after January 8th, 2019.
Services requested on site must be paid directly and will be invoiced after the Meeting.

CANCELLATIONS AND REIMBURSEMENT FOR HOTEL RESERVATIONS:

Please note that hotels will not accept any changes or cancellations directly.

Up to and including 21 December 2018 Euro 25.00 administrative charge.

From 22 December 2018 to 7 January 2019 included: one night cost will be withheld as cancellation charge.

From 8 January 2018 to 21 January 2019 included: the paid amount will be refunded with a deduction of 70% as cancellation charge.

From 22 January 2019: no refund will be made for cancellations, changes, no shows and reduction of stay

CANCELLATIONS AND REIMBURSEMENT must be officially submitted in writing to OIC by fax +39 055 570227, or E-mail registrationsmainz@oic.it



SUMMARY

| | | |
|--|---|--|
| Registration Fee | € | |
| Hotel accommodation pre-payment (inclusive of booking fee € 25,00) | € | |
| Total amount to be paid | € | |

Payment by Credit card

With my signature I authorise OIC srl to charge my credit card upon confirmation with the GRAND TOTAL of all services booked well as with all extra fees resulting out of other hotel categories and/or re-bookings.

VISA MasterCard AMERICAN EXPRESS

Card number: - - -

Expiry (month/year): -

Card Security Code CVV* last 3 digits on the reverse side of VISA/MASTERCARD

Card Security Code CVV* 4 digits on the front of the AMERICAN EXPRESS

Cardholder's name (as on card):

Notice for VISA/MASTERCARD Credit Card Holders from outside the Eurozone: an additional 3% handling fee will be applied by VISA. The applied exchange rate is in line with the major financial institutions.

For American Express and Eurozone VISA/MASTERCARD: an extra charge of 2.5% (+vat) will be applied for withdrawals of more than € 2.500

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.

GENERAL CONDITIONS

Registration and services booked can only be confirmed after receipt of full prepayment or valid credit card details.

I/We accept your general information and conditions. I/We agree to electronic credit card cashing and accept the preceding terms and conditions.

With regard to data collected by OIC S.r.l. I confirm having read the disclosure in link <http://www.egsmainz2019.com/privacy-policy> and the rights acknowledged according to EU Regulation 2016/679

I agree to allow processing of all data collected for the purposes and in the ways indicated in the disclosure – Reference 1 – under letters a) and b)

I agree to allow processing of all data collected for the purposes and in the ways indicated in the Disclosure – Reference 1 – under letter c) for the purpose of disseminating and promoting information material pertaining to the activities and services that may be of interest

DATE

SIGNATURE