

# WOFAPS AREA MEETING

UPDATES IN PEDIATRIC SURGERY: CONTROVERSIES AND ADVANCES  
22-25 SEPTEMBER, 2011, TUZLA, BOSNIA AND HERZEGOVINA



## Registration Form Page 1 of 2

Please note that you may also reserve accommodation online: [www.wofaps-bosniameeting.com](http://www.wofaps-bosniameeting.com)

Mr.  Mrs.  Ms.  Prof.  Dr.

Family Name (please underline) / First Name, Initials

Hospital / Institute / Company

Department

Street, No

P.O. Box

Postal Code / Zip Code

City

Continent

County (and state where applicable)

E-mail

Telephone work

Telephone home

Mobile Phone

Medical Specialty

Fax

c/o Paragon Conventions  
18, Avenue Louis-Casai  
Tel: +41-22-5330-948  
Fax: +41-22-5802-953  
Mail: [registration@wofaps-bosniameeting.com](mailto:registration@wofaps-bosniameeting.com)  
1209 Geneva  
Switzerland

## Registration Fees

Early-Bird  
Registration  
Prior to July 14,  
2011

From July 15 to  
Sept 14, 2011

On-site  
Registration

Amount

Full Delegates	€ 200	€ 240	€ 290	
Residents	€ 150	€ 175	€ 200	
Accompanying Guest		€ 25		
Gala Dinner (Optional)		€ 20		
Will you be attending the WOFAPS party on the evening of Friday 23 September, 2011?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

### Registration fees Include:

Participant: Participation in Scientific sessions, Meeting publications, Lunch, Coffee breaks and welcome reception & WOFAPS Party.

Accompanying Person: Welcome reception & WOFAPS Party

### Accompanying Person

Name / First Name

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## Registration Form Ctd (Page 2 of 2)

one form per delegate  
Please note that you may also register online: [www.wofaps-bosniameeting.com](http://www.wofaps-bosniameeting.com)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

## Transfers

Tuzla is a 100km drive from Sarajevo, Belgrade and Zagreb. The meeting organizers are offering all registered participants complimentary transfers from the above airports. Please complete the following details in order to confirm your transfer (without completing the below details the meeting organizers will be unable to provide you with a transfer).

<b>Please select the airport you will be flying into:</b>	<input type="checkbox"/> Sarajevo	<input type="checkbox"/> Belgrade	<input type="checkbox"/> Zagreb
<b>Airline &amp; Flight Number (Arrival)</b>			
<b>Date of Arrival</b>			
<b>Time of Arrival</b>			
<b>No. of Pax</b>			
<b>Airline &amp; Flight Number (Dep)</b>			
<b>Date of Departure</b>			
<b>Time of Departure</b>			
<b>No. of Pax</b>			

The total amount will be paid as follows:

\*\* **Credit Card:**       Visa       MasterCard       American Express       Diners

No \_\_\_\_\_ Date of expiration \_\_\_\_\_

CVV2 Code \_\_\_\_\_

Name as shown on Card: \_\_\_\_\_

**Bank transfer:** Paragon Conventions

**Reference:** WOFAPS BOSNIA 2011. **Account no:** 0240-459284.02J, **Iban:** CH490024024045928402J, **Swift:** UBSWCHZH80A, **Currency:** Euro  
Bank charges are the responsibility of the customer and should be paid at source in addition to the registration fees. Payment via bank transfer is subject to receipt of confirmation from the bank

## Cancellation Policy

Refund of Registration Fees will be made as follows: Up to 90 days prior to arrival-full refund less bank charges, Up to 60 days prior to arrival-cancellation charge of €30, Less than 45 days prior to arrival-no refund  
Comments: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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## Accommodation Form

Please note that you may also reserve accommodation online: [www.wofaps-bosniameeting.org](http://www.wofaps-bosniameeting.org)

Prof.  Dr.  Mr.  Mrs.  Ms.  Other

Last Name (please underline) / First Name, Initials

Job title / Position

Company / Organization / Firm

Department

Street, No

P.O. Box

Postal Code / Zip Code

City

Country

State / County (where applicable)

Fax

Business phone No.

Mobile phone No.

E-mail @

c/o Paragon Conventions  
18 Avenue Louis-Casai  
1209 Geneva  
Switzerland  
Tel: +41 (0) 22 5330 948  
Fax: +41 (0) 22 580 2953  
[registration@wofaps-bosniameeting.org](mailto:registration@wofaps-bosniameeting.org)

## Hotel Reservation

HOTEL	Distance from the Venue	SINGLE ROOM	DOUBLE ROOM
Hotel Tuzla – Superior Room	Venue	€65	€69
Hotel Tuzla – Standard Room	Venue	€45	€49

In case if you are booking a double room, please indicate the name of the person you share the room with: \_\_\_\_\_

\* Early Reservation is highly recommended.

Date of Arrival: \_\_\_\_\_ Date of Departure: \_\_\_\_\_ No. of Nights: \_\_\_\_\_

\* Rates for all the hotels are per room and per night, including breakfast and taxes.

The total amount will be paid as follows:

Credit Card:  Visa  MasterCard  American Express  Diners

The charge will be made in Euro according to the currency on the actual day of the transaction.

Card number:

Date of expiry

CVV2 / Security Code

Name as shown on Card: \_\_\_\_\_ Passport No. \_\_\_\_\_

If the card holder is not the person participating, please provide us with a written confirmation from the card holder and a copy of his/her passport.

Bank Check No. \_\_\_\_\_ enclosed, made payable to Paragon Conventions

Bank transfer: Reference: Reference: WOFAPS BOSNIA 2011. Account no: 0240-459284.02J, Iban: CH490024024045928402J,

Swift: UBSWCHZH80A, Currency: Euro

Bank charges are the responsibility of the payee and should be paid at source in addition to the registration fees.

## Hotel Deposit and Cancellation

A deposit of one night charge must accompany all requests for accommodation. Full payment for hotel must be completed prior to your arrival. With your signature you authorize Paragon Conventions to charge the above credit card for the balance of your account three weeks prior to your arrival for services ordered.

90 days before arrival: full refund, less bank charges.

30 days prior to arrival: one-night cancellation charge.

Less than 14 days prior to arrival: no refund.

In the event of non-arrival, reservation will be automatically released, and full payment will be non-refundable. If you arrive later or leave earlier than on the dates indicated on your reservation form, the total accommodation amount will be charged and no refunds will be made

Comments: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_