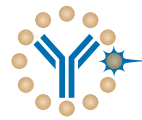




10th International Congress of Neuroimmunology



10th ESNI COURSE
European School
of Neuroimmunology

Sitges (Barcelona, Spain) October 26th - 30th, 2010

REGISTRATION FORM

Please write in block letters or print

ISNI 2010 ORGANISING SECRETARIAT:
EEM INTERNATIONAL CONGRESS SERVICES SRL
VIA ELIO LAMPRIDIO CERVA, 167 - 00143 ROME (ITALY)
TEL. +39 06 5193499 - FAX +39 06 5194009 - E-MAIL: SECRETARIAT@ISNI2010.ORG

GENERAL INFORMATION

TITLE / FIRST NAME / LAST NAME

HOSPITAL / INSTITUTE / COMPANY

DEPARTMENT

STREET, NO.

P. O. BOX

POSTAL CODE / ZIP CODE

CITY

COUNTY / PROVINCE / STATE

COUNTRY

TELEPHONE (INCL. COUNTRY AND AREA CODES)

FAX (INCLUDING COUNTRY AND AREA CODES)

E-MAIL ADDRESS

REGISTRATION FEES (VAT INCLUDED)

	FROM SEPTEMBER 30, 2010 & ON-SITE	ONE DAY REGISTRATION	
10th ESNI Course (course only)	EURO 200,00	EURO 200,00	€ _____
10th ISNI Congress:			
ISNI Members	EURO 600,00	EURO 180,00	€ _____
Non ISNI Members	EURO 700,00	EURO 200,00	€ _____
Student*	EURO 400,00	EURO 120,00	€ _____
Exhibitor pass	EURO 150,00		€ _____
			€ _____

Prices are quoted in Euro, payments in other currencies will not be accepted.

* Students paying the full registration fee for the ISNI Conference will attend the ESNI Course free of charge.

* Registration form must be accompanied by a valid student card and by a letter signed by the head or supervisor of department confirming the status.

IMPORTANT

For on-site registration, in order to avoid a long wait in line, you will be asked to leave a document (id card or passport) at the registration desk and will receive a temporary badge until your registration procedure is completed (data registration and payment). Please return at the registration desk at your earliest convenience to pick up your document and your name badge.

The participant's registration fee includes:

- participant's badge and congress material
- access to scientific sessions and exhibition area
- certificate of attendance
- coffee breaks
- lunches

PAYMENT

Please choose your preferred method of payment for the amount stated in the "TOTAL" box:

TOTAL € _____

CASH

CHEQUE

Please make your cheque in **Euro only**, non endorsable and payable to:
EEM INTERNATIONAL CONGRESS SERVICES SRL

AMERICAN EXPRESS

VISA

MASTERCARD

CARD NUMBER _____ SECURITY CODE _____ EXPIRY DATE (MM/YYYY) _____

CARD HOLDER _____ SIGNATURE _____ DATE _____