



EUROHAND 2008

JUNE 19th-21st, 2008, LAUSANNE

Beaulieu • Lausanne • Switzerland

Eurohand 2008
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REGISTRATION FORM FOR EUROHAND 2008

Please use one registration form per person.

Mr. Mrs. Prof. Dr. MD PhD other: _____

Last name _____ First name _____

Address _____

PC/Place _____ Country _____

Telephone _____ Fax _____

E-mail _____

Date _____ Signature _____

CONGRESS FEES

| | | On or before May 18 th , 2008 | From May 19 th , 2008 or on site |
|--------------------------|--|---|--|
| <input type="checkbox"/> | FESSH members/Medical doctors | CHF 740.00 | CHF 780.00 |
| <input type="checkbox"/> | FESSH members/Medical doctors (incl. book**) | CHF 847.00 | CHF 913.00 |
| <input type="checkbox"/> | EFSSH members/Therapists | CHF 440.00 | CHF 480.00 |
| <input type="checkbox"/> | EFSSH members/Therapists (incl. book**) | CHF 547.00 | CHF 613.00 |
| <input type="checkbox"/> | Residents/Fellows* | CHF 350.00 | CHF 390.00 |
| <input type="checkbox"/> | Residents/Fellows* (incl. book**) | CHF 457.00 | CHF 523.00 |
| <input type="checkbox"/> | Accompanying persons | CHF 80.00 | CHF 100.00 |

*Providing a letter from Head of Department confirming resident / fellow status

**«Instructional course lectures: current state of the art in osteosynthesis»

FURTHER BOOKS OR BOOKS ONLY «Instructional course lectures: current state of the art in osteosynthesis»

| | | On or before May 18 th , 2008 | From May 19 th , 2008 or on site | Bookseller price per book |
|--------------------------|-----------------------|---|--|---------------------------|
| <input type="checkbox"/> | _____ Number of books | CHF 107.00 Congress price per book | CHF 133.00 Congress price per book | CHF 144.00 (VAT excl.) |

GALA DINNER

Yes, I will participate at the gala dinner in Montreux on June 20th, 2008.

_____ Number of persons – Price: CHF 160.00 per person

Payment needs to be made in Swiss francs (CHF) and before the congress by one of the following methods:

PAYMENT BY CREDIT CARD

VISA Mastercard American Express

Card no _____ Expiration date _____

Secure code (Three or four digits) _____

Cardholder _____

Date _____ Signature _____

PAYMENT BY BANK TRANSFER

Account in CHF (Swiss francs)

Bank: Zuger Kantonalbank, PO Box 1158, 6301 Zug

Account n°: 77-055.537-03, Clearing n°: 787, IBAN n°: CH11 0078 7007 7055 5370 3, SWIFT code: KBZGCH 22

(bank charges on your behalf)





Last name

First name

EFSTH WORKSHOPS*

As the number of participants for EFSHT workshops is limited, you are kindly requested to register. Please note that workshops 1/2/5/6/7/8/9/10/11/12 are fully booked. Free places are available for the following workshops only:

THURSDAY, JUNE 19th, 2008: 10:30-11:30

Workshop 3: Wrist radiographs

THURSDAY, JUNE 19th, 2008: 11.30-12.30

Workshop 4: Wrist examination

SATELLITE SYMPOSIA

Please tick the symposium which you would like to attend.

THURSDAY, JUNE 19th, 2008: 12:45 - 13:45

S1: Progress in treatment of distal radius fractures – presentations and discussions

S2: Comminuted fractures and malunions of the distal radius

CANCELLATION

For cancellations on or before May 18th, 2008, 50% of congress fees will not be refunded/are owed. For cancellations after May 18th, 2008 / "no-show" congress fees will not be refunded/are owed.

*valid with registration form for Eurohand 2008 only (first page)