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Foundation of Cardiovascular Imaging
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Working Group on Cardiovascular Imaging

XXIV

WORLD CONGRESS OF ECHOCARDIOGRAPHY AND CARDIOVASCULAR IMAGING

Recent Advances in Echocardiography and Cardiovascular Imaging

17-20
MAY 2018
Albena Resort • Bulgaria



REGISTRATION FORM

Please, fill out the Registration Form in block letters and return to:

Congress Management and Events /CME/ Ltd.

Contact person: Ms. Daniela Radulova

Tel.: + 359 896 700 967 • Fax: + 359 2 988 80 35

E-mail: daniela@cmebg.com

1 PERSONAL DATA

Title: Prof. Dr. Mr. Ms. Others

First name(s): _____ Last name: _____

Company: _____ Nationality: _____

Address: _____

City: _____ State: _____ Country: _____ Postal / Zip Code: _____

Phone : _____ Mobile: _____ Fax: _____

Email: _____

Dietary Preference Vegetarian Others _____

Accompanying Persons (do not have access to the plenary, coffee breaks and exhibition area)

	Title	First name(s)	Last
1.			
2.			

2 CONGRESS REGISTRATION FEES

<input type="checkbox"/>	Early Bird Rate valid until 20 March 2018	120 Euro
<input type="checkbox"/>	Late registration fee after 20 March 2018 and on spot	150 Euro

- **Registration fee includes:** admission to scientific sessions on 17, 18, 19 & 20 May, admission to industry satellite activities, welcome reception, congress material including the final program and bag, admission to the industrial exhibition

3 CANCELATION & REFUNDS FOR THE CONGRESS

- 100% refund – CME Ltd. must receive a notification of cancellation in writing at least 20 days before the event. This will entitle the delegate to a 100% refund less an administrative fee of 20 EUR.
- No refund - 100% cancellation fee will be charged for any cancellations made after 27 April.
- Notifications of cancellations must be sent by email to Mrs. Daniela Radulova / daniela@cmebg.com /

4 PRE AND POST CONGRESS COURSES REGISTRATION FEES

Pre –Congress Course 80 Euro
16 May 2018 /Wednesday/

Post –Congress Course 70 Euro
20 May 2018 /Sunday/

HIT Members and participant till 38 years free admission

An identity document should be provided by anyone wishing to participate in the Post – congress course in order to prove their age and to gain free registration.

- Registration fees include: admission to the scientific sessions, materials of the courses, coffee breaks and should be paid until **3 May 2018**.

5 Terms & Conditions

- Registrations are confirmed only upon receipt of payment.
- Registration fee applied will be based on date of payment.
- If the payment is made within 10 days to the event date, a proof of payment or a credit card/letter of guarantee will be required.
- Should your payment not be received prior to 10 days to the event date, the Event Organizer reserves the right to cancel your pre-registration.

Total for Registration Fees	_____ Euro
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6 Airport Transfers

	Transfer	Date of arrival / departure	Flight No.	Flight time	Price per person	No. of persons	Sub total
<input type="checkbox"/>	Varna Airport to Albena Resort				26 Euro		
<input type="checkbox"/>	Albena Resort to Varna Airport				26 Euro		

Total for Airport transfers	_____ Euro
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7 Hotel Accommodation /on Full Board basis/

	Hotels	Room type	Single occupancy per night	Double occupancy per night	Check in date	Check out date	Number of nights
<input type="checkbox"/>	Paradise Blue Hotel 5 *	Deluxe /sea view/	<input type="checkbox"/> 100 Euro	<input type="checkbox"/> 142 Euro			
		Deluxe /park view/	<input type="checkbox"/> 96 Euro	<input type="checkbox"/> 134 Euro			
<input type="checkbox"/>	Flamingo Grand Hotel 5*	Studio executive	<input type="checkbox"/> 92 Euro	<input type="checkbox"/> 132 Euro			
		Studio deluxe	<input type="checkbox"/> 90 Euro	<input type="checkbox"/> 126 Euro			
		Studio standard	<input type="checkbox"/> 74 Euro	<input type="checkbox"/> 112 Euro			
<input type="checkbox"/>	Flamingo Hotel 4*	Standard room	<input type="checkbox"/> 68 Euro	<input type="checkbox"/> 102 Euro			
<input type="checkbox"/>	Amelia 4*	Standard room	<input type="checkbox"/> 68 Euro	<input type="checkbox"/> 102 Euro			
<input type="checkbox"/>	Sandy Beach Hotel 3*	Standard room	<input type="checkbox"/> 60 Euro	<input type="checkbox"/> 86 Euro			

The prices are in Euro, per room, per night and include overnight, breakfast, lunch, dinner, and all taxes.

Rates are valid only if reservation and payment are made to CME Ltd. and not directly to hotels. Any change of booking must be sent to CME Ltd. Full prepayment of accommodation until 16 April 2018 is required in confirmation of the hotel reservation.

Early hotel booking is recommended as the congress will take place at the very beginning of the summer season at Bulgarian Black Sea coast.

Participants are advised to book at their earliest convenience as reservations will be made on first-come-first-served basis.

Only written cancellations to CME Ltd. will be considered.

- before 16 April 2018 – full reimbursement less the amount due for one night
- after 16 April 2018 or no-show - no refunds will be made

Reducing the length of stay on-site is not accepted.

Hotel Check in: 14.00 hrs; Check out: 12.00 hrs. In case of early check in, we would kindly request you to pre-book your room to one night prior.

Total for Hotel Accommodation	_____ Euro
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8 Total for Payment

Sub Total Registration	Euro
Sub Total Airport Transfers	Euro
Sub Total Hotel Accommodation	Euro
Total payment required	Euro
GRAND TOTAL	Euro

9 Methods of Payment

Payment Method 1 – Bank Transfer

Beneficiary	Congress Management and Events Ltd.
Account	IBAN BG18UBBS80021448705410
Bank	United Bulgarian Bank /UBB/
Address	8, Tsar Kaloyan Str. , 1000 Sofia, Bulgaria
Swift Code	UBBSBGSF

* Please indicate your name, against remittance reference enabling our Registration Department to accurately identify your payment.

Payment Method 2 – Credit Card payment Authorisation

Only Visa and Master Card are accepted.

NAME AND ADDRESS OF CARDHOLDER / DELIVERY ADDRESS

The name and address details below MUST be filled in exactly the same as for your credit card.

These details may be checked when validating your credit card.

Name	
Street Address	
City & Country & Zip	
Telephone No & Fax No	
E-mail	
Best time for contact	

CREDIT CARD DETAILS

Card Type: Eurocard / MasterCard Visa

Name of the Issuer: _____

CVV (VISA): CVC2 (Eurocard/MasterCard):

Card Number: _____ Valid to: _____ / _____

Cardholder's Address: _____

I wish to order the above named items, I am aware of the smallprint specifically about credit cards, an address above matches the credit card. I am using my credit card according to the agreement I have with the credit card company.

Today's Date: ____/____/____

Signature: _____