

Registration Form

For a participant of the conference

Participant's details - please, send us your registration form as soon as possible				
First name and surname:				
Academic/professional title:				
Institution, city:				
E-mail:				
Mobile phone:		Expected arrival time	Flight number	
Arrival date:		time:	arrival	
Departure date:		time	departure	

Please fill in the below table accurately and check the expected number of nights to save Organisers from unnecessary expenses.

Booking of your stay

Please book a room::		<input type="checkbox"/> single	<input type="checkbox"/> double	<input type="checkbox"/> triple	<input type="checkbox"/>				
Please, book my stay on days:									
30 June	<input type="checkbox"/>	1 July	<input type="checkbox"/>	2 July	<input type="checkbox"/>	3 July	<input type="checkbox"/>	4 July	<input type="checkbox"/>
bed	<input type="checkbox"/>	bed	<input type="checkbox"/>	bed	<input type="checkbox"/>	bed	<input type="checkbox"/>	bed	<input type="checkbox"/>
board	<input type="checkbox"/>	board	<input type="checkbox"/>	board	<input type="checkbox"/>	board	<input type="checkbox"/>	board	<input type="checkbox"/>

(please tick an option of your arrival and departure to book your stay)

Pursuant to Regulation of Minister of Health of 06 October 2004 concerning methods of fulfilling the professional training requirement for physicians and dentists, participants of the conference will be granted educational points.

In that connection, please tick the appropriate option:

I am member of Chamber of Physicians and Dentists	<input type="checkbox"/>	I am member of National Chamber of Laboratory Diagnosticians	<input type="checkbox"/>
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Doctors who want to take part in medical case conferences and consultations with patients, please tick the following options and give us this information in the registration desk upon arrival at the conference.

Participation in panels	<input type="checkbox"/>	Medical case conferences and medical consultations for patients	<input type="checkbox"/>
A doctor consults patients	<input type="checkbox"/>	A doctor participating in consultations	<input type="checkbox"/>

Accommodation and catering will be reserved for you at the Training Centre "Allianz" at ul. Główna 1, Białostrzegi near Warsaw. The centre is located at Zegrze Lake, surrounded with forests and a beautiful park. It is a perfect place for people seeking recreation. There are single, double and triple rooms for guests as well as suites, located on three storeys. Accommodation at hotels will be booked by Organizers.

According to Personal Data Protection Act of 29.08.1997 (OJ of 2002, No. 101, item 926 with later amendments),

I consent to the processing of my personal data for the needs of XIV International Conference entitled
"Rare Diseases - our task"

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 Signature