







REGISTRATION FORM RESERVED TO PHYSICIANS WORKING IN LDC

(Least Developed Countries) listed below

NOTICE:

EUROSON CONGRESS 2024 organization encourages the participation of physicians working in LDC (see list below) by applying the early-bird fees (by June 15), regardless date deadlines and Efsumb affiliation.

1. Afghanistan	16. Guinea	31. Rwanda
2. Angola	17. Guinea	32. Sao Tome and Principe
3. Bangladesh	18. Haiti	33. Senegal
4. Benin	19. Kiribati	34. Sierra Leone
5. Burkina Faso	20. Lao People's Dem. Republic	35. Solomon Islands
6. Burundi	21. Lesotho	36. Somalia
7. Cambodia	22. Liberia	37. South Sudan
8. Central African Republic	23. Madagascar	38. Sudan
9. Chad	24. Malawi	39. Timor-Leste
10. Comoros	25. Mali	40. Togo
11. Democratic Rep. of the Congo	26. Mauritania	41. Tuvalu
12. Djibouti	27. Mozambique	42. Uganda
13. Eritrea	28. Myanmar	43. United Republic of Tanzania
14. Ethiopia	29. Nepal	44. Yemen
15. Gambia	30. Niger	45. Zambia

Dr/Prof Surname	Name			
Place and date of birth		□ EFSUMB MEMBER		
Fiscal code				
Affiliation (Hospital, University, Clinic, etc.)				
Private address	City	Country	Country code	
Telephone	Mobile			
Email	PEC			
☐ Food intolerances				
Requested EACCME credits YES	□NO			

EUROSON CONGRESS | REGISTRATION FEES

NOTICE:

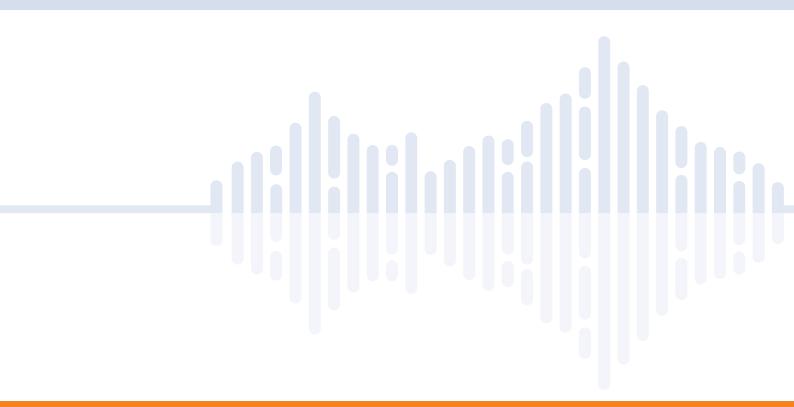
- All fees are VAT 22% included and based on early-bird quote, regardless date deadlines and Efsumb affiliation.
- All scheduled events are EACCME accredited.
- No simultaneous translation will be provided.
- Registration deadline: by October 15. After this date no registration will be accepted.

EUROSON CONGRESS 9 | 11 november

NO MEMBERSHIP IS REQUIRED	BY 15 th JUNE under 35 years	over 35 years
ONLY CONGRESS full period	150,00 €	180,00 €
CONGRESS + n.1 ONE-DAY COURSE	190,00 €	240,00 €
CONGRESS + n.1 TWO-DAY COURSE	240,00 €	290,00 €

ADVANCED COURSES

NO MEMBERSHIP IS REQUIRED	BY 15 th JUNE under 35 years	over 35 years
ONE- DAY COURSES The cost refers to each Course Nephrology-Endocrinology-Lyceum	120,00€	150,00 €
TWO - DAY COURSES The cost refers to each Course Vascular-CEUS-Musculoskeletal	170,00 €	200,00 €



HOTEL BOOKING (not mandatory)
In case the participant is willing to book hotel accommodation, please refer to the Hotels list available in Euroson 2024 website.

HOTEL NAME (write your choice among those	listed in Euroson 2024 website)	DUS	DOUBLE		
		€	€		
Room type: DUS DOUBLE TW	'IN				
Arrival date	Departure date		Nights		
TOURIST TAX This tax is €4,50/per day/per person and is not included in Hotel fee. It must be paid at the hotel at departure. CANCELLATION POLICY					
Registration Fees For Congress and Course registration fees, if cand lations must be sent in writing to the Organizing Se			no refund will be provided. Cancel-		
Hotel Accommodation For cancellations of hotel reservations received by June 30th, the entire amount paid will be refunded; after this date there will be no refund. It should also be noted that in case of cancellations received after June 30th or in case of a no-show, the Hotel has the right to charge the customer with the amount for the entire stay. Cancellations must be sent in writing to the Organizing Secretariat; refunds will be made after the conclusion of the Congress.					
SUMMARY Indicate below the event(s) you register to and the	e relevant fee(s)				
	€				
	€				
☐ HOTEL BOOKING	€				
TOTAL	€				
PAYMENT METHODS					
\square Bank Transfer in favour of:					
FONDAZIONE S.I.U.M.B c/o Banca Sella ag.13	3 Roma - V. dei Gracchi, 142 - c/c 05252	1672960			
CAB 03213 - ABI 03268 - CIN P - IBAN IT33P0326	803213052521672960 - BIC (SWIFT COD	E) SELBIT2BXXX			
\square Credit Card: \square Master Card \square Visa (no Ar	merican Express)				
Card number		expiring date (mm/aa)		
CVV2 (3 last digits on the card back front)					
Name of Card Owner	Signature	Date			
INVOICE MUST BE USADED TO					
INVOICE MUST BE HEADED TO:					
(Mandatory field, registrations without fiscal de	etalis Will not de accepted)				
Name of invoice header	0.				
Fiscal address	City	Country	Country code		
Fiscal code	VAT n°				
Email	PEC				
☐ Not having VAT number					
Modifications or VAT refunds for invoices already issued will not be accepted.					
Lauthorize SIUMB FOUNDATION to include my data in	its lists for the processing of the same for	dissemination and/or scientific pure	noses. At any time, nursuant to art. 13		
I authorize SIUMB FOUNDATION to include my data in its lists, for the processing of the same for dissemination and/or scientific purposes. At any time, pursuant to art. 13 of Legislative Decree n196 of 30/06/2003, I may have access to my data, ask for its modification or cancellation or oppose its use free of charge.					
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Date Signa	ture				