

# REGISTRATION FORM

Excellence in Pharmacovigilance: Clinical Trials and Post-Marketing # 17558  
2-6 October 2017 | The Crystal | London, UK



## REGISTRATION FEES

Registration fee includes refreshment breaks and lunches and electronic access to training course material. Please check:

| FEES  | MEMBER                              | NON-MEMBER                          |
|---|-------------------------------------|-------------------------------------|
| INDUSTRY  | € 3'320.00 <input type="checkbox"/> | € 3'475.00 <input type="checkbox"/> |
| ACADEMIA/CHARITABLE/GOVERNMENT/NON-PROFIT (FULL-TIME) | € 1'660.00 <input type="checkbox"/> | € 1'815.00 <input type="checkbox"/> |

If DIA cannot verify your membership upon receipt of registration form, you will be charged the non-member fee.

**Please note that the full amount must be received by DIA by commencement of the course to get the electronic access to the material.**

## DIA MEMBERSHIP

All non-members fees include a one year membership option. If you registered at one of the non-member rates noted above, you will automatically become a DIA member. Join DIA now to qualify to save on future events and to receive all the benefits of membership. Visit [www.diaglobal.org](http://www.diaglobal.org) and click on Membership for more details.

If you do not want a membership, please indicate your preference below:

I do not want complimentary membership

The DIA Europe, Middle East & Africa Contact Centre Team will be pleased to assist you with your registration from Monday to Friday between 08:00 and 17:00 CET.

Tel. +41 61 225 51 51 Fax: +41 61 225 51 52

Email: [EMEA@DiAglobal.org](mailto:EMEA@DiAglobal.org)

Mail: DIA Europe, Middle East & Africa, Küchengasse 16, 4051 Basel, Switzerland

Web: [www.DiAglobal.org](http://www.DiAglobal.org)

## Cancellation Policy

All cancellations must be made in writing and be received at the DIA Europe, Middle East and Africa office four weeks prior to the event start date. Cancellations are subject to an administrative fee:

- Industry (Member/Non-member) € 200.00
- Academia/Charitable/Government/Non-profit (Full-time) (Member/Non-member) € 100.00

If you do not cancel four weeks prior to the event start date and do not attend, you will be responsible for the full registration fee.

DIA reserves the right to alter the venue and dates if necessary. If an event is cancelled or postponed, DIA is not responsible for airfare, hotel or other costs incurred by registered attendees. Registered attendees are responsible for cancelling their own hotel and travel reservations.

## Transfer Policy

You may transfer your registration to a colleague prior to the start of the event but membership is not transferable. Substitute attendees will be responsible for the non-member fee, if applicable. Please notify the DIA office of any such substitutions as soon as possible.

## Photography Policy

By attending the event, you give permission for images of you, captured during the conference through video, photo, and/or digital camera, to be used by DIA in promotional materials, publications, and website and waive any and all rights including but not limited to compensation or ownership.

| ATTENDEE DETAILS  |            | PAYMENT METHODS   |  |
|---|------------|---|--|
| Please complete in block capital letters or attach the attendee's business card here.                             |            | <b>Credit cards:</b> Payments by VISA, Mastercard or AMEX can be made by completing the details below. Please note that other types of credit card cannot be accepted.  |  |
| <input type="checkbox"/> Prof <input type="checkbox"/> Dr <input type="checkbox"/> Ms <input type="checkbox"/> Mr |            | <input type="checkbox"/> Please charge my <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX   |  |
| Last Name   |            | Card N° <input type="text"/> |  |
| First Name  |            | Exp. Date <input type="text"/> / <input type="text"/>   |  |
| Job Title   |            | Cardholder's Name <input type="text"/>  |  |
| Company   |            | <b>Bank transfers:</b> When DIA completes your registration, an email will be sent to the address on the registration form with instructions on how to complete the bank transfer. Payments in EURO should be addressed to "Account Holder: DIA." Please include your name, company, Course ID # 17558 as well as the invoice number to ensure correct allocation of your payment.                |  |
| Address   |            | Payments must be net of all charges and bank charges must be borne by the payer. If you have not received your confirmation within five working days, please contact DIA Europe, Middle East and Africa.  |  |
| Postal Code   |            | By signing below, I confirm that I agree with DIA's Terms and Conditions of booking. These are available from the office or on <a href="http://www.diaglobal.org/EUTerms">http://www.diaglobal.org/EUTerms</a>  |  |
| City  |            | <input type="text"/> Date <input type="text"/> Signature  |  |
| Country   |            |   |  |
| Telephone Number  | Fax Number |   |  |
| Attendee email required for course material access  |            |   |  |