REGISTRATION FORM | ID# 22112



| Accelerating CMC Workshop | | | |
|---|----------------------------------|---|------------------------|
| 27-28 Sep 2022 Face-to-Face Sevilla, SP | Fault bind Mana | hauk Chandaud Mambau | Non Mambar |
| CATEGORY | Early-bird Mem (until 02 Aug) | ber* Standard Member (from 02 Aug) | Non-Member |
| Industry (or Representative) | € 1050.00 □ | € 1′400.00 □ | € 1'585.00 🗖 |
| Group of 4 or more (available only for DIA members) | | € 860.00 □ | N/A |
| Group of 10 or more (available only for DIA members) | | € 645.00 □ | N/A |
| Government/Patients/Academia/Non-Profit (ull-Time) | N/A | € 180.00 □ | € 365.00 □ |
| Networking Dinner | | € 80.00 □ | ı |
| * Early Bird does not apply to Non-Members. | | | |
| If DIA cannot verify your membership upon receipt of registration form, you will be charged fee. A special discount for SMEs on the standard fee is available for a limited number of places. To prove your status as an SME, a confirm tion of the European Medicines Agency is necess DIA in Basel for more information. | | *All fees are subject to the applicable VAT. Payme registration and must be paid in full by commence | |
| Registration includes: presentation material, onsite refreshments and lunch | | TOTAL AMOUNT DUE: € | |
| ATTENDEE DETAILS | DIA M | EMBERSHIP | |
| PLEASE COMPLETE IN BLOCK CAPITAL LETTERS OR MAKE REGISTRATION EVEN | All nonme | ember fees include a one year DIA membership |), at no additional co |
| SIMPLER BY ATTACHING THE ATTENDEE'S BUSINESS CARD HERE Explore membership ben | | nembership benefits t <u>DIAglobal.org/Membe</u> | |
| □ Prof □ Dr □ Ms □ Mr | | bership will renew automatically at the end hip term, at the then current membership r | |
| Last Name | automatio | membership renewal at any time by accessing | ng your account onl |
| First Name | | bal.org. If you would like to decline complinations. If you would like to decline complinations. | mentary membersh |
| Company | | l like to decline a one year complimentary DI | A membership. |
| Job Title | - | | |
| | TERM! | S AND CONDITIONS | |
| Address | Cancella | | and at the DIA office |
| | | lations must be made in writing and be receiv r weeks prior to the event start date. Cancella | |
| Postal Code City | administra | ative fee: | |
| Country | | (Member/Non-member) € 200.00 iia/Charitable/Government/Non-profit (ull-tim | ao) (Mambar/Nan |
| Telephone | _ | r) € 100.00 | ie) (Member/Non- |
| Attendee email required | | cancellation: € 50.00 | |
| to access presentations | | llations after this date, or if the delegate fails of fees will be given and be responsible for the | |
| Please provide your European VAT number | | ves the right to alter the venue and dates if | - |
| | | ed, DIA is not responsible for airfare, hotel o ered attendees. Registered attendees are resp | |
| PAYMENT METHODS | | hotel and travel reservations. | |
| Credit cards: Payments by VISA, Mastercard or AMEX can be made by completing the deta | | | |
| below. Please note that other types of credit card cannot be accepted. | _ | ransfer your registration to a colleague prior to pership is not transferable. Substitute attende | |
| Card N° VISA MC AMEX | for the no | on-member fee, if applicable. Please notify the substitutions as soon as possible. | · |
| Exp. Date / | If you atte | ream and Recording and a DIA event, we make video and audio reco ce and online) that may include your parti | |
| Cardholder's Name | including | your image, questions and comments. To view recording policy, click <u>here</u> . | • |
| ☐ Bank transfers: When DIA completes your registration, an email will be sent to the addre | Privacy | Policy | |

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, Event ID# 22112 as well as the invoice number to ensure correct allocation of your payment.

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 in Basel.

By signing below, I confirm th t I agree with DIA's Terms and Conditions of booking, and with DIA Health and Safety Code of Conduct.

| Date | Signature | |
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| | | |

DIA respects the privacy of all of its members and customers. To view our privacy policy, click here.

You agree that your personal data will be transferred to DIA in the US

The DIA will be pleased to assist you with your registration from Monday to Friday between 09:00 and 17:00 CET.

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Web www.DIAglobal.org

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