Under the Auspices of

Congress Organiser
Sinklar Conference Management B.V





# **REGISTRATION FORM**

| (Please fill in all the details in capital letters)  |   |   |               |                     |
|--|---|---|---------------|---------------------|
| Prof/Dr/Mrs/Mr/MsFirst Name  | Family Name   |   |               |                     |
| Institution/Company:   |   |   |               |                     |
| Address:   | Postal code City  | Country   |               |                     |
| E-mail of the delegate (required data, compulsory)   |   |   |               |                     |
| An official letter of invitation to attend the completion of registration and full payment.  | Congress will be forwarded to the reque   | esting particip   | ant by e-ma   | il <b>only</b> upon |
| PLEASE TICK THE APPROPRIATE BOX(ES)  |   |   |               |                     |
|  | PROFILING OF REGISTRANT   |   |               |                     |
| □ Endocrinologist □ Rheumatologist □ Geriatrician □ Orthopaedic Surgeon □ Radiologist □ Internist  PROFIL □ Public / general hospital or affiliate □ Private hospital / practice | □ Rehabilitation Physician □ General Practitioner □ Pharmacist □ Physiotherapist □ Nurse □ Other Allied Health Professional  ING OF ORGANISATION / EMPLOYER □ University □ Community health □ Research laboratory □ Health department / other governmental organisation | ☐ Scientist ☐ Industry Sc ☐ Industry Bu ☐ Media ☐ Other | nmental organ |                     |
|  | IOF Congress Membership   |   |               |                     |
| I wish to benefit from the offer and become IOF Co<br>entitled to register at the Members Registration fee<br>Member fee below (no refunds will be possible af                   | ongress Member for one year for free and be e. If Yes, please choose the IOF CSA and ESCEO  | SAB   | ☐ Yes*        | □ No                |
|  | Special Needs   |   |               |                     |
| It is important to us that you enjoy the WCO-IOF-ES special needs, please let us know and we will do ou  |   | have any  | □ Yes         | □ No                |
|  |   |   |               |                     |

#### **Registration Fee (VAT INCLUDED)** From March 7th and **Early Registration** Categories **Pre-registration** Until December 4th, 2016 December 5th - March 6th, 2017 On site ☐ IOF CSA and ESCEO SAB Member\* <del>735 €</del> <del>795 €</del> 995€ <del>795 €</del> ■ Non-Member 895 € 995€ ☐ Student\*\* <del>250 €</del> <del>270 €</del> 300€ ☐ CNS Free registration free free free ☐ ASBMR guest - free registration free free free ☐ ESCEO SAB Member free (and abstract free free free submitted)\*\*\* ☐ Press representative\*\*\*\* free free free

- Members A member of either the IOF or ESCEO Board, or IOF Committees of Scientific Advisors (CSA), or the IOF representative of the Committee of Corporate Advisors (CCA), or a member of one of the IOF national or patient societies (CNS). For a complete list of current CNS visit www.iofbonehealth.org/societies-country-index-view/all
- FREE or Pro2 IOF member You have the opportunity to register as a FREE IOF member, or as a paid Pro2 member, on the IOF website at <a href="https://www.iofbonehealth.org/become-member">www.iofbonehealth.org/become-member</a>

All registration fees include Tax for all categories.

### Participant's registration fee includes:

- A congress badge which gives admission to all Plenary Sessions, Meet-the-Expert Sessions, Satellite Symposia, Poster Sessions and Exhibition Area.
- One copy of the Programme & Abstract USB Key
- A Congress bag containing official material
- A Certificate of Attendance
- Welcome Cocktail on March 23rd, 2017 (Fortezza da Basso)

### The registration fee does not include:

- Airport transfers
- Local transportation to the Congress Venue
- Meals & drinks
- Accommodation
- Excursions
- Insurance

| SECISTRATION: | £ | V٦ | + 1 | Incl | באוו | м |
|---------------|---|----|-----|------|------|---|

### **Meet-the-Expert**

One per day – Upon availability. You will receive the confirmation of your seat in the allocated MTE via e-mail with the registration. If your preference is fully booked it will not be included in your voucher confirmation. This is my Preference:

| FRIDAY MARCH 24 <sup>th</sup> , 2017 (14:00 – 15:00)                                 |          |
|--|----------|
| ☐ F1 Diabetes and bone - Serge Ferrari   | SOLD OUT |
| ☐ F2 Osteoporosis before menopause - Ego Seeman                                      | SOLD OUT |
| ☐ F3 What can we expect from biomarkers in osteoarthritis - Gabriel Herrero-Beaumont | SOLD OUT |
| SATURDAY MARCH 25 <sup>th</sup> , 2017 (14:00 – 15:00)                               |          |
| ☐ SA1 Rare bone disease: approaches to classification - Kassim Javaid                | SOLD OUT |
| ☐ SA2 Management of corticosteroid-induced osteoporosis - Jonathan D. Adachi         | SOLD OUT |
| ☐ SA3 Connected devices in musculo-skeletal health - Olivier Bruyère                 | SOLD OUT |
| SUNDAY MARCH 26 <sup>th</sup> , 2017 (09:00 – 10:00)                                 |          |
| ☐ SU1 Rare bone disease: novel treatment approaches - Maria Luisa Brandi             | SOLD OUT |
| ☐ SU2 Assessment of frailty and sarcopenia in daily practice - Stefania Maggi        | SOLD OUT |
| ☐ SU3 Management of osteoporosis in males - Jean-Marc Kaufman                        | SOLD OUT |

### Please tick the appropriate box(es)

<sup>\*</sup>Those persons for which one of the following two definitions below are applicable:

<sup>\*\*</sup>A certification and signature from either a mentor/supervisor verifying training/degree status or from an employer verifying paramedical/non-doctoral status must be sent to Pacific World via e-mail.

<sup>\*\*\*</sup>To register as an « ESCEO SAB Free (abstract submitted) », the participant must be a member of the ESCEO SAB (ESCEO Scientific Advisory Board) and if he/she is a member of the ESCEO SAB, he/she must has submitted an abstract.

<sup>\*\*\*\*</sup> A copy of your Press card must be sent to Pacific World via e-mail.

### **Conditions of Payment**

| I authorize the Congress Office to debit my card for the amount indicated he   | ere above:  |
|--|---|
| Number: IIIIIIIIIIII   | Expiry date: III/II                                       |
| Card Verification Code* (3 digits on back of Visa/MasterCard, 4 digits on from | nt of AMEX): IIII   |
| CARDHOLDER NAME:   |   |
| Signature and date (Compulsory):   |   |
| *CVC: Your card security code is a three or four digit number. For Visa and E  | urocard, the code is the last three digits printed on the |
| signature strip on the back of the card. For American express, the code is the | e four digits printed on the front of the card.           |

☐ By credit card: VISA / MASTER / EUROCARD / AMERICAN EXPRESS (no other cards accepted):

#### Confirmation

Your voucher will be sent upon receipt of the registration form and full payment. Approximately one week before the Congress you will receive the confirmation letter with the barcode to the e-mail provided. Please present your confirmation letter at the Registration Desk in order to obtain your meeting documentation and badge.

## Payments, Cancellation and Refunds

### Individual Badge Name Changes (Substitution of Registration)

An administrative fee of 65 € per badge will be charged for a badge name change after October 30th, 2016. Written permission from the original participant will be required, along with full contact details of the substitution.

### **Individual Cancellation & Refund Policies**

#### Registration:

Notification of cancellation and refund requests must be submitted in writing by e-mail to <a href="mailto:registration-wco-iof-esceo@pacificworld.com">registration-wco-iof-esceo@pacificworld.com</a>
Before September 30th 2016: 50% reimbursement.

No refunds will be given for cancellations and/or modifications received after September 30th 2016 in any case.

#### Lost Badge / Forgotten Badge

In case of a lost or forgotten badge, an administrative fee of 65 € will be charged for the reprint of the badge after verification of identification (passport, driving license or other recognized identification paper).

### **Liability and Insurance**

The Congress organizer Sinklar Conference Management B.V. (under the auspices of IOF and ESCEO), the Congress Venue (FORTEZZA DA BASSO, FLORENCE), its official appointed agencies for Registrations (Pacific World) and the Congress Secretariat (HUMACOM SPRL) and any suppliers, representatives or agents linked to the organization of the Congress shall not be held liable by any person for any injury, damage, theft, loss, medical problem or inconvenience which may be suffered by any person while traveling to or from, or during such person's presence in Italy in connection with this Congress. Participants are advised to purchase their own insurance against any such occurrences.

### Cancellation or Modification of the Congress due to Force Majeure

In case of force majeure, the Congress organizer have the right to alter or cancel the Congress without prior notice, however a notice of the occurrence shall be given by Sinklar Conference Management B.V. as soon as reasonably possible. Force majeure shall mean any circumstance beyond the reasonable control of Sinklar Conference Management B.V. which prevents or impedes the holding of the Congress, including, but not limited to, government action, war or hostilities, riot or civil commotion, plague or other epidemic such as SARS, bird flu, etc., earthquake, flood, hurricane, cyclone, fire or other natural physical disaster, explosion, accident or breakdown, strike, lack of the usual means of transportation or terrorism or due to events which are not attributable to wrongful intent or gross negligence of Sinklar Conference Management B.V. Sinklar Conference Management B.V. shall not be liable for any direct or indirect, incidental or consequential damages, losses, expenditures or any other inconveniences or costs caused by such modification or cancellation of the Congress. Furthermore, registration fees will not be reimbursed by Sinklar Conference Management B.V.

### Disclaimer

All reasonable endeavours will be made to hold the Congress and to present its programme as scheduled under circumstances which assure the comfort and safety of all participants. However, Sinklar Conference Management B.V. reserves the right to modify the programme, unilaterally and without notice. Neither Sinklar Conference Management B.V. nor their officers, directors, employees, representatives or agents, shall be held liable by any person as a result of the cancellation of the Congress or any of the arrangements, programmes or plans connected therewith, or for any injury, damage or inconvenience which may be suffered by any person while traveling to or from, or during such person's presence in Italy in connection with this Congress. Participants are advised to purchase their own insurance against any such occurrences.

Any litigation stemming from the above contract will be tried Italy where the Italian law is exclusively applicable.

| ☐ I hereby accept the above registration conditions of the Congress and agree for the payment corresponding to my INVOICE DETAILS: | equests                  |
|--|--------------------------|
| First Name and Family Name or Company Name   |                          |
| Fiscal address   |                          |
| Postal codeCityCountry   |                          |
| Fiscal ID/VAT Number   |                          |
| Please, send by e-mail the Registration Form and the payment to the Technical Secretariat:   |                          |
| Pacific World Registration Management  | $\subseteq_{\mathbf{X}}$ |
| Contact e-mail registration: registration-wco-iof-esceo@pacificworld.com  Phone: +34 96 352 81 61                                  | pacific worl             |
| www.wco-iof-esceo.org  | opening up perspectiv    |
| W W W .W .U - IU I - C 3 L C U .U I g  |                          |

The information of personal data gathered in your registration and those people that facilitates to us in the frame of this relation, will be incorporated into a file controlled by Meetings & Events Spain, S.L.U. The purpose of the use and treatment of the personal data is the registration, management and participation, as well as the sending of information relative to the next acts or events organized and commercial & marketing purposes. In conformity with Spanish Organic Law 15/1999 of Personal Data, you can exercise your rights of access, rectification, cancellation and in case opposition, sending a request in writing, accompanied of a photocopy of your ID card to the following address:

Meetings & Events Spain, S.L.U. Camí Son Fangós, 100 Palma de Mallorca or dataprotection@hotelbeds.com (with copy to registration-wco-

iof-esceo@pacificworld.com), indicating in the communication " Access Rights LOPD ".