

GROUP REGISTRATION CONTRACT

1. The group registration process is valid for a **minimum of 10 delegates**.
2. In order to facilitate your group registration, please fill out this form and return by email to: reg_cora23@kenes.com
3. In order to benefit from the reduced group registration fees, payments must be paid **prior to the below deadlines**.
4. Please send the **final** name list no later than **4 weeks prior to the congress**. Please do not send preliminary name lists.
5. Name changes will be permitted free of charge until **2 weeks prior** to the congress (up to 15% of the participants names).
After this date, any name change will be subject to 30 EUR charge per name.
6. **Onsite group registration pick-up** for groups leaders will be available upon request.
7. Payment is accepted by credit card or bank transfer. Credit card payment is subject to **additional 4% commission**.
8. **Cancellation policy:** Refund of registration fee will be as follows:

Note! Refunds for groups will be processed after the congress.

All cancellations must be emailed prior to the below deadlines:

- Cancellations received until and including December 12, 2022 – full refund
- Cancellations received between December 13 and March 1, 2023 – 50% will be refunded.
- As of March 2, 2023 – no refund will be made.

9. Fees for participants include:

- Participation in all scientific sessions.
- Entrance to the Exhibition
- Refreshments as per times indicated in the program
- Printed Congress Materials
- Certificate of Attendance (sent via email after the congress).

10. Please fill in the below information:

Company (Group Name): _____

Booking Agency (if relevant): _____

Contact Person: _____

Email: _____

REGISTRATION CATEGORIES

Fees (in EUR) apply to payments received prior to the indicated deadlines.

Category	Early rate Until 14 December 2022	Regular rate From 15 December, 2022 - 28 February, 2023	Onsite rate From 1 March, 2023
Full participant	€ 565	€ 670	€ 780
Low & Lower-middle Income Countries *	€ 375	€ 430	€ 490
Trainee (Students/Fellows/Nurses) **	€ 375	€ 430	€ 490

*Countries classification is defined according to the World Bank Country Classification. [Click here](#) for more information on the Country Classification data according to the World Bank website.

**Proof of Student/Fellow/Nurse status is mandatory - In order to benefit from the special fee, a submission of your status confirmation (official letter signed by the Head of Department – hospital, company or academic institution which confirms the status of the applicant) or copy of your status ID) must be sent during the online registration.

Group Registration Details:

Pharmaceutical company name: _____

Required registration category: _____ No. of Registrations: _____

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Total Group Participants: _____

Important Note: Abstract Presenters

In case there are Abstract Presenters among the group delegates please advise the names and abstract numbers in advance in order to guarantee the abstract will remain in the Scientific Programme.

Please mark below accordingly:

☐ There are no abstract presenters in this group.

☐ Attached is a list of the abstract presenters in this group.



Group Registration Pick-up

Group registration collective pick-up will be available onsite, an appointment must be coordinated in advance. Exact times will be advised prior to the congress.

Note: in case of group registration pick-up, individual barcode confirmation letters will not be sent to group participants.

We strongly recommend individual pick-up.

Please mark below accordingly:

☐ Group registration pick-up is required.

☐ No group pick-up, the delegates will be collecting their registrations individually.

Data Protection:

☐ I confirm that prior to transferring Kenes the group delegates contacts, our company has obtained consent from the individuals concerned.

PAYMENT DETAILS

Payment information:

Billing Address (to appear on invoice and receipt): _____

VAT number: _____

This form was submitted by:

Full Name: _____

On Behalf of (company name): _____

Signature: _____ Date _____

Please select a method of payment (credit card or bank transfer):

Credit card payment (Credit card payment is subject to additional 4% commission):

I authorize 'KENES International – Organizers of Congresses' to charge the below credit card for the amount of:

____ EUR. *** Please authorize the full amount, including the 4% credit card fee.

Type: ☐ Visa / ☐ MasterCard / ☐ AMEX



Number: _____ Expiration date: _____

Name of Card holder: _____ CVC: _____

Signature of Card Holder: _____

Bank Transfer Payment:

- Please ensure that the name of the group/paying company are stated on the bank transfer.
- Bank charges are the responsibility of the payer and should be paid at source in addition to the registration fees.

Please make drafts payable in EUR only to:

Account Name: CORA 2023 Congress, Turin, Italy

Bank Details: Credit Suisse Geneva, 1211 Geneva 70, Switzerland

Account Number: 1500934-92-428

IBAN Number: CH02 0483 5150 0934 9242 8

Bank Code: 4835

Swift No: CRESCHZZ80A