



EUROPEAN FEDERATION  
FOR PHARMACEUTICAL  
SCIENCES

2<sup>nd</sup> EUFEPS and EAPB Workshop on



# Monoclonal Antibodies: Cutting-edge Science for New Medicines

June 3-5 • 2008 • Crowne Plaza • Heidelberg • Germany

Family name: \_\_\_\_\_ First name: \_\_\_\_\_

## REGISTRATION FORM continued PLEASE USE BLOCK LETTERS

### ACCOMMODATION

Arrival date \_\_\_\_\_ Departure date \_\_\_\_\_

Cancellation of hotel  
reservations will be  
accepted until April 30,  
2008.

#### Hotels

	Single room Price/night	No. of rooms	Double room Price/night	No. of rooms
Crowne Plaza	EUR 179	_____	EUR 199	_____
Leonardo	EUR 171	_____	EUR 199	_____
Alt Heidelberg	EUR 109	_____	EUR 137	_____

Breakfast and VAT are included in the hotel rates.  
To book your hotel reservation full pre-payment of the total cost of the accommodation is required.

### PAYMENT DETAILS

Please make sure to indicate  
Congrex Sweden  
AB, Attn: Mab08 0859  
(payment reference  
number) and your name  
on all money transfers.

All payments should be made in EUR to Congrex Sweden AB, att: Mab08  
We are not able to accept personal cheques, company cheques or Eurocheques.  
Please indicate below which means of payment you are using and **payment reference number 0859**

Banker's Draft       Transfer to Handelsbanken, Box 7190, SE-103 88 Stockholm, Sweden,  
BIC/SWIFT-Code: HANDSESS, Account no. 6137-0434 84239,  
IBAN No SE24 6000 0000 0000 4348 4239 in EUR to Congrex Sweden AB.

Please note that bank transfers are not accepted later than April 30, 2008.

American Express       VISA       Eurocard/Mastercard

Credit Card No. \_\_\_\_\_ Expiry date \_\_\_\_\_

CCV Security Code\*: \_\_\_\_\_

\*On Amex 4 digits on front of card, on Visa and Mastercard 3 digits on back of card

Having signed below, I herewith confirm that I am fully aware of the cancellation conditions stipulated in the announcement.

I hereby authorise Congrex Sweden AB to debit this credit card account for the total amount due. I also consent to Congrex debiting or crediting my credit card account with the amount of any subsequent change(s) to the items booked.

Date \_\_\_\_\_ Name \_\_\_\_\_

Signature \_\_\_\_\_