

# XIX WORLD CONGRESS OF ASTHMA

5<sup>th</sup>-8<sup>th</sup> NOVEMBER, 2008

MONTE CARLO - GRIMALDI FORUM



International Association of Asthmology



## REGISTRATION FORM

### Please use capital letters

Surname \_\_\_\_\_ Name \_\_\_\_\_

Specialty \_\_\_\_\_

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Institute Address \_\_\_\_\_

Zip code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Registration fee (V.A.T. included):

FEE	Late	On site
	1 <sup>st</sup> July - 30 <sup>th</sup> September, 2008	After Sept. 30 <sup>th</sup> until the congress
<b>Delegates</b>	<b>€ 580,00</b>	<b>€ 660,00</b>
<b>Accompanying</b>	<b>€ 150,00</b>	<b>€ 150,00</b>

After September 30<sup>th</sup>, registrations can only be made on site.

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Congress registration € \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_  
+ € **10,00 (Bank fees)**  
Total € \_\_\_\_\_

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