

REGISTRATION FORM - COURSE

AGAH COURSE 17 - 19 FEBRUARY 2015 - Part 1

22 - 24 APRIL 2015 - Part 2

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Arbeitsgemeinschaft
für angewandte
Humanpharmakologie e.V.
Association for Applied
Human Pharmacology

Introductory Course in Early Medicines Development

This course addresses postgraduates in life sciences interested in early clinical development of medicinal products and ethical aspects of early phase clinical trials.

COURSE VENUE - Part 1

VCH - Hotel Philipp-Jakob-Spener Haus
Dominikanergasse 5 · 60311 Frankfurt/M.
www.spenerhaus.de

COURSE VENUE - Part 2

Office - SocraTec R&D GmbH
Im Setzling 35 · 61440 Oberursel

REGISTRATION & CONTACT

CSi Hamburg GmbH
Jungfrauenthal 22 · 20149 Hamburg
Phone: +49 40 30770300

Please send your registration form to:

Telefax: +49 40 30770301

E-Mail: agah-veranstaltungen@csihamburg.de

First name Surname		<input type="checkbox"/> Professor	<input type="checkbox"/> Dr./MD	<input type="checkbox"/> PD
Company/Affiliation				
Address				
ZIP	City	Country		
Phone		Telefax		
E-Mail				

ATTENDANCE FEE - payable in advance, including admission to all sessions and breaks.

<input type="checkbox"/> Part 1 (2 ½ days) or <input type="checkbox"/> Part 2 (2 ½ days)			<input type="checkbox"/> Part 1 <u>and</u> Part 2 (2 x 2 ½ days)	
Member*	<input type="checkbox"/>	1.100 EUR	<input type="checkbox"/>	1.900 EUR
Non Member	<input type="checkbox"/>	1.450 EUR	<input type="checkbox"/>	2.500 EUR

Society* AGAH BAPU CPI AHPPI DGPharMed DGKliPha

Special fees for students are available on request.

Accommodation required (please use page 2 of this form) not required

CONDITIONS

The course fee is per person and charged on behalf of the AGAH e.V. VAT will not be charged according to § 4, para. 22 German Turnover-Tax Law. All bookings are subject to change. Cancellation: Notification of cancellation should be submitted in writing. In case of cancellation received before 02 October 2014 (Part 1 only and Part 1 and 2) | 02 January 2015 (Part 2 only) we refund 50% of the registration fee less 25 € service charge. No refund thereafter. All refunds will be settled after the Workshop. Substitution is possible.

Your preferred payment method:

Bank transfer upon receipt of the invoice and payment order **Credit card** (please fill in 2nd page)

I accept the conditions mentioned above. I agree with the cancellation conditions and the payment procedure. In case of payment by credit card I also agree with a one-time debit directly from the given credit card.

Signature _____

Date _____

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Accommodation Part 1 – Limited room block until 06/01/2015	Single room
VCH Spenerhaus	87,00 EUR/per night Breakfast included
Arrival: _____ Departure: _____ Nights: _____	
Remarks:	
Accommodation Part 2 – Limited room block until 22/03/2015	Single room
Parkhotel am Taunus · How to find (PDF Link) Hohemarkstraße 168 · 61440 Oberursel	98,00 EUR/per night Breakfast included
Arrival: _____ Departure: _____ Nights: _____	
Remarks:	

The prices are per room/night including the mentioned services and VAT valid upon request and subject to availability. Please understand that a hotel booking is only possible if a guarantee by credit card or a written guarantee (assumption of cost by the buyer) is given.

A written confirmation will be sent to you separately. The room will be held for late arrival. The credit card is for guarantee purposes only. To cancel without cost, you must notify CSi Hamburg GmbH in writing at least until 03 weeks before arrival. From 03 weeks before arrival, the Hotel will charge 50%-, less than 01 weeks before arrival the hotel will charge 80% of the booked accommodation. If you do not show up at the hotel ("No Show"), 90% of the accommodation will be charged by the indicated hotel. Your credit card will not be charged until you checkout or fail to cancel before the deadline. The guest is responsible for payment of all charges (room and all incidental charges) directly to the Hotel.

I guarantee my Hotel reservation by credit card (mandatory field):

Credit Card Number _____ Expiry Date ____ / ____

Credit Card Holder _____

Or by a written insured assumption of costs (to be sent separately).

I agree with the conditions mentioned above.

Signature _____

Date _____