Registration Please **write all information** in **PRINT LETTERS** very **CLEARLY and add your qualification as a physician, "MD or "DO" or "NP", to your name-**

Dr. (MD or DO or NP): I___I___I

Family Name: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

First Name: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Speciality: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Address: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Zip code: I___I___I___I___I___I___I___I **City:** I___I___I___I___I___I___I___I___I___I___I___I___I___I

Country: I I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Phone : I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Mobile: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Fax: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

E-mail: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

MEMBERSHIP: Each participant becomes automatically **a member of both the World Society of Anti-Aging Medicine** (www.wosaam.org) **and the International Hormone Society** (www.intlhormonesociety.org) (five-year free memberships)

If you do not want to become a member of these societies, please mark the following case:

0 I do not agree to become a member

Please fill in the training programs you want to participate in: special early registration prices:

0 Anti-aging medicine specialization (AAMS): module 4 on nutritional and therapies, November 19-22: 4 days lecture : **1600 euros (€)**

0 AAMS: module 4 on nutritional and therapies 2 days DVD (available October 2009): 700 €

0 Hormone therapy specialization (HTS-IHS): module 2 on hormone therapies of obesity and dietetic-metabolic aspects: November 19-22: 4 days lecture : **1600 €**

0 Hormone therapy specialization (HTS-IHS): module 2 on hormone therapies of obesity and dietetic-metabolic aspects: 2 days DVD (available October 2009): 700 €

0 other payment: ……………………………………………………………………………………….€

Total sum: **……………………………………….€**

Type of Bank card: 0 Visa 0 Mastercard 0 American express

Card number: I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I___I

Three (visa, mastercard) or four (Amex) digit number: I___I___I___I___I

Signature:

If you want us to reserve a hotel for you at special rates, please indicate here:

Hotel choice: 0 no 0 yes if yes: R**oom type:** 0 single room 0 double room

Number of nights: 0 night Nov., 18-19 0 night Nov., 19-20 0 night Nov., 20-21

0 night Nov., 21-22 0 night Nov., 22-23

TOTAL number of nights/ ………