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Tina Rothenbühler
Conference Coordinator

Registration BioMedical Transporters 2009 August 9-13, 2009

Please complete the following form, print, sign where indicated, and return to Tina Rothenbühler via fax at +41 31 631 34 10. You will receive an email confirmation once your registration has been processed.

Conferee Information	:		
☐ Speaker	☐ Attend	lee	
☐ Prof. ☐ Dr.	☐ Mr.	☐ Mrs.	
First Name:			
Middle Initials:			
Last Name:			
Title:			
Affiliation, Institution	:		
Department:			
Building:			
Street Address:			
City:		State:	
Postal Code:		Country:	
Phone:		Fax:	
Email:			

Registration Packages Entire Conference (August 9-13, 2009)

The registration package includes the following:

- 1. Reception and Lunches
- 2. Apéro on Sunday evening
- 3. Beverages and coffee during breaks
- 4. Apéro at the Tuesday evening poster session

Note: Single day registrations are not available.

Please select the appropriate conferee registration	fee:			
 Invited Speaker Academic Conferee (Before Mai 1, 2009) Academic Conferee (After Mai 1, 2009) Industry Conferee (Before Mai 1, 2009) Industry Conferee (After Mai 1, 2009) Student/Pre-doctoral (Before Mai 1, 2009) Student/Pre-doctoral (After Mai 1, 2009) Please check here if you are vegetarian (for cateri Niesen Excursion/Dinner: I would like to participate at the Special Excursion to the 	ne Mount Niesen on Tuesday, August 11,			
2009. The cost for this is US \$ 125 per person (include beverages).	s bus ride, cable train and dinner with			
- /				
Attendee	US \$125			
Accompanying Person 1	US \$125			
Accompanying Person 2	US \$125			
Accompanying Person 3	US \$125			
Name of accompanying person 1:				
Name of accompanying person 2:				
Name of accompanying person 3:				
Special Farewell Dinner at the Schloss Schadau:				
I would like to participate at the Schloss Schadau Special Farewell Dinner/Entertainment on Thursday evening, August 13, 2009. The cost for this is US \$ 125 per person. The excursion will include dinner, excellent wine, non-alcoholic beverages and traditional Swiss folklore music.				
Conference Attendee	US \$125			
Accompanying Person 1	US \$125			
Accompanying Person 2	US \$125			
Accompanying Person 3	US \$125			
Name of accompanying person 1:				
Name of accompanying person 2:				
Name of accompanying person 3:				

I would like to make a reservation for Reception. (Includes food and beverages)	my Accompanying Person for the Sunday evening
Accompanying Person 1	US \$35
Accompanying Person 2	US \$35
Accompanying Person 3	US \$35
Name of accompanying person 1:	
Name of accompanying person 2:	
Name of accompanying person 3:	
Total Amount to be charged:	US \$
Credit Card Type (Please select):	☐ Visa, ☐ Mastercard or ☐ American Express
Credit Card Number:	
Expiration Date:	_
charges, will be refunded. After this date, be made after the congress. If these term	1009, the registration fee, less US \$80 for administration no refunds will be made for cancellations. All refunds will as are acceptable to you, please sign below. credit card Total Amount listed above.
Signature:	Date: