



SAUDI SOCIETY OF OBSTETRICS AND GYNECOLOGY

THE 3rd BENIGN VULVAR DISORDERS COURSE

17th APRIL 2016, SUNDAY
LE MERIDIEN HOTEL, ALKHOBAR

REGISTRATION FORM

Please write your name **CLEARLY** in **BLOCK CAPITALS**, the way you want it to appear on your **CERTIFICATE OF ATTENDANCE**.

NOTE: Name submitted in this form is considered CORRECT and READY for FINAL PRINTING OF CERTIFICATE.

First Name

Middle / Other Names

Last Name

Title: Prof. DR. MR. MS. OTHER _____ Gender: Male Female

Saudi Council Registration ID #:

Institution/Hospital/Department:	Mobile #:
Position:	Level of Residency:
Email Address:	

REGISTRATION FEE:

ONLINE Registration – SR 500

ONSITE Registration – SR 800

Accredited with **8 CME** Hours by Saudi Commission for Health Specialties

N.B: On site payment will be as above even if you sent the registration form before the course start date. So kindly try to take the chance of advance payment.

IMPORTANT INFORMATION:

1. Registration will only be confirmed upon receipt of payment.
2. **NO SHOW** due to negligence or related work responsibilities will not be considered and therefore, no refund will be granted to the requesting participant.
3. Cancellation requires a minimum of 3 weeks' notice made due to emergency medical circumstances will be subjected to Course Organizer's approval. Fifty (50%) percent of the course fee will be paid when approved. Cancellation made less than 3 weeks is not permitted and course fees will be forfeited or will not be refunded.
4. Failure to attend the entire course duration is considered cancelled or "No Show" and therefore, course fees will not be considered for refund.
5. The course fees in not allowed to be transferred to another person.
6. The registration is **LIMITED ONLY TO 40 SEATS, FIRST COME; FIRST SERVE BASIS** will be the guideline.
7. Please email your filled out registration form to **Ms. Joycelyn Cachola @ perinealtrauma_2015@yahoo.com**
8. To deposit you payment, wait for the IBAN numbers to be forwarded to your registered email. Kindly wait for the confirmation of your registration after the payment verifications.

I have read and agreed to the terms and conditions.

Signature & Date: _____



