

International Continenence Society 38th Annual Meeting
20-24 October, 2008, Cairo, Egypt

REGISTRATION & ACCOMMODATION FORM - PRESS

Please PRINT in BLOCK LETTERS and FAX, Email or AIRMAIL to:

Registration and Accommodation department

1-3 Rue du Chantepoulet, Ch-1211 Geneva 1, Switzerland

Tel: +41 22 908 0488, Fax: +41 22 732 2850, E-mail: ics2008_reg@kenes.com

KENES International
CARES FOR YOUR ORGANIZATION

IDENTIFICATION

Please complete this section accurately. The information you provide will allow us to correspond with you efficiently.

Participant (Please TYPE or PRINT IN BLOCK LETTERS)

Family Name Initials First Name

Title Prof. Dr. Mr. Mrs. Ms Year of birth [YYYY]

E- Mail Address @ Mobile phone: Country code / mobile number

Office Address

Institute Dept.

No. Street Suite/Apt.

City State/Province Country Postal code

Telephone (office hours):Country code/city code/number Fax: Country code/city code/number

Mailing Address (if different from the above)

Address

City State/Province Country Postal code

You and Your Privacy

*We collect personal information for use by the ICS and the ICS Permanent Congress Organiser (Kenes International) to inform delegates of ICS Annual Meetings or relevant information. *Platinum/Gold and Silver sponsors of the ICS meetings are provided with mailing labels of participants one month before the Meeting and a final list of participants via e-mail after the meeting. We will not release or sell mailing lists to any other third parties. ***Delegates must indicate when registering for an ICS meeting if they do not wish for their contact information to be forwarded to the sponsors.** *The contact details provided at registration may be used by the exhibition companies during the meeting to gather data from the delegates via scanners. However these companies should advise the delegate that they are being scanned for contact details. We do not store credit card information (it is only used during a financial transaction and then discarded). **I DO NOT wish my details to be forwarded to sponsoring companies**

REGISTRATION FEES

PRESS EXEMPT- FULL REGISTRATION*

**Please send your registration & accommodation form together with a copy of your press ID and/or written confirmation from your work place*

Please indicate the number of course/workshop you wish to participate in:

| |
|--|
| Monday, 20 October, 09:00 –12:00 <input type="checkbox"/> Course 1 <input type="checkbox"/> Course 2 <input type="checkbox"/> Course 3 <input type="checkbox"/> Course 4 <input type="checkbox"/> Workshop 14 <input type="checkbox"/> Workshop 15 <input type="checkbox"/> Workshop 16 <input type="checkbox"/> Workshop 17 <input type="checkbox"/> Workshop 18 <input type="checkbox"/> Workshop 19 |
| Monday, 20 October, 14:00 –17:00 <input type="checkbox"/> Course 5 <input type="checkbox"/> Workshop 20 <input type="checkbox"/> Workshop 21 <input type="checkbox"/> Workshop 22 <input type="checkbox"/> Workshop 23 <input type="checkbox"/> Workshop 24 <input type="checkbox"/> Workshop 25 <input type="checkbox"/> Workshop 26 <input type="checkbox"/> Workshop 27 |
| Tuesday, 21 October, 09:00-12:00 <input type="checkbox"/> Course 7 <input type="checkbox"/> Course 8 <input type="checkbox"/> Course 9 (free) <input type="checkbox"/> Course 10 <input type="checkbox"/> Workshop 28 <input type="checkbox"/> Workshop 29 <input type="checkbox"/> Workshop 30 <input type="checkbox"/> Workshop 31 <input type="checkbox"/> Workshop 32 <input type="checkbox"/> Workshop 33 |
| Tuesday, 21 October, 14:00-17:00 <input type="checkbox"/> Course 11 <input type="checkbox"/> Course 12 <input type="checkbox"/> Course 13 <input type="checkbox"/> Workshop 34 <input type="checkbox"/> Workshop 35 <input type="checkbox"/> Workshop 36 <input type="checkbox"/> Workshop 37 <input type="checkbox"/> Workshop 38 <input type="checkbox"/> Workshop 39 <input type="checkbox"/> Workshop 40 |

Courses & Workshops Registration Instructions:

1. There will be three places allocated to each course/workshop (excluding free events) for members of the press.
2. Each member of press will be entitled to two free passes to attend courses/workshops.
3. To obtain these passes, the member of press must request a pass to a specific workshop from the reception desk in the press room.
4. These will be allocated on a first come first serve basis and the name of the member of press will be recorded upon distribution.
5. Should a member of press decide they do not wish to attend a course/workshop after receiving the pass, they MUST return it to the ICS press room so that the pass can be redistributed.
6. NB: the invitation to press will include expressions of interest to attend particular workshops/courses. This will not guarantee entry to these courses as receipt of passes is decided on a first come first serve basis as outlined above.

ACCOMMODATION (in US\$)

Rates are per room, per night, including breakfast and all taxes

Rates include **free daily morning** transfers to the congress venue and back to the hotel at the end of the sessions

Heliopolis Area (near the venue)

| Hotel | Kenes rating | Room Type | Single Room | Double Room |
|----------------------------|------------------------|-----------|--------------------------------|--------------------------------|
| Intercontinental Citystars | ***** <i>Deluxe</i> | Standard | <input type="checkbox"/> \$260 | <input type="checkbox"/> \$290 |
| | | Club | <input type="checkbox"/> \$305 | <input type="checkbox"/> \$340 |
| JW Marriott | ***** | Standard | <input type="checkbox"/> \$260 | <input type="checkbox"/> \$280 |
| Le Meridien | ***** | Standard | <input type="checkbox"/> \$210 | <input type="checkbox"/> \$220 |
| Concorde El Salam | ***** ½ | Standard | <input type="checkbox"/> \$220 | <input type="checkbox"/> \$235 |
| Sonesta Cairo | ***** ½ | Standard | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$215 |
| Holiday Inn | **** | Standard | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$215 |
| Novotel Cairo Airport | **** | Standard | <input type="checkbox"/> \$100 | <input type="checkbox"/> \$120 |
| Baron | *** | Standard | <input type="checkbox"/> \$90 | <input type="checkbox"/> \$110 |

Down Town area (along the Nile River)

| Hotel | Kenes rating | Room Type | Single Room | Double Room |
|---|--------------|-----------|--------------------------------|--------------------------------|
| Conrad – Fully Booked | ***** | Classic | <input type="checkbox"/> \$240 | <input type="checkbox"/> \$260 |
| | | Deluxe | <input type="checkbox"/> \$265 | <input type="checkbox"/> \$285 |
| Intercontinental Sameramis - Fully Booked | ***** | Standard | <input type="checkbox"/> \$230 | <input type="checkbox"/> \$250 |
| Ramses Hilton – Fully Booked | ***** | Standard | <input type="checkbox"/> \$230 | <input type="checkbox"/> \$250 |
| | | Nile View | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$270 |
| Nile Hilton Fully Booked | **** | Standard | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$220 |

RESERVATION:

Reservations will only be confirmed if credit card details are fully supplied; alternatively, please forward a deposit of 1 night payment per room in order to guarantee your accommodation. The booking will be final upon receipt of the corresponding deposit.

Check- In Date

Check -Out Date

Total night/s

* I will share my accommodation with: _____

Family name

First Name

PAYMENT

Please indicate the amount enclosed and preferred mode of payment. Ensure that you send the fully completed form together with your payment:

Courses and Workshops/ Additional tickets USD _____

Deposit for Hotel Accommodation USD: _____ (1 night charge per room)

Total: USD _____

Option 1: Credit Card: Visa MasterCard Diners American Express

Number

Expiry Date (month/year)

Name as shown on card: _____

Option 2: Bank Transfer - with your name and address indicated on the reverse. If payment is made for more than one person or by companies please make sure all names are indicated and send fully completed registration and accommodation forms together with a copy of the bank transfer. Please make drafts payable to: "ICS 2008", Credit Suisse Geneva, 1211 Geneva 70, Switzerland, Bank Code: 4835, Account no. 693980-52-132, Swift No. CRESCHZZ12A. IBAN No: CH97 0483506939805213 2.

Bank charges are the responsibility of the participant and should be paid at source in addition to the registration and accommodation fees.

Option 3: Cheque made payable to: "ICS 2008"

CANCELLATION POLICY – HOTEL ACCOMMODATION:

All changes/cancellations must be received in writing by fax or email to Kenes international. Please do not contact the hotel directly.

Cancellations/changes received 21 days prior to arrival: full refund less bank charges (\$50).

Cancellations/changes received 20-14 days prior to arrival : 1 night fee will be charged

Cancellations/changes received less than 14 days prior to arrival : no refund

In the event of non-arrival, the hotel will automatically release the reservation and payment will be non refundable

Date _____

Signature _____

By signing this Form you authorize KENES INTERNATIONAL to charge the above credit card for the balance of your account 3 weeks prior to your arrival for services ordered.