# 2025 - Registration Form

## LAPAROSCOPIC GYNECOLOGICAL SURGERY

## ENGLISH-SPEAKING COURSE / LIMITED TO 30 PARTICIPANTS

Dr./Prof. Family name.....

First name.....

Mobile phone..... Email.....

Gender.....

Please specify (category and name): Hospital Clinic Private practice

Professional address .....

Zip code .....

City ..... Country.....

**March 10 - 12**

**Course :** ☐ Early Bird registration -No Accommodation - $1800

***Early Bird Special: Save $200!*** *After February 28th, the regular price of $2,000 will apply. Don't miss out on this exclusive offer*

**Accommodation :** ☐ Phoenix or Lebanon or Five to Five - $70/night ---- indicate total number of nights

☐ Radisson Blu - $185/night ---- indicate total number of nights

- ***a single room, breakfast and transport to the center included in the accommodation options***
- ***Lunch and Coffee break included (served at the IRCAD Africa center)***

## Payment:

Please bill my credit card ☐ VISA ☐ MC ☐ AMEX

N° | | | | | | | | | | | | | | | | Expiry Date | | / | | Security code | | | | |

☑ **I accept the cancellation policies (See page 2)**

Name & Signature:

## Registration Fees Include

- Theoretical sessions
- Live or pre-recorded operative demonstrations
- 3 half-days of hands-on sessions on live tissue
- Coffee breaks and lunches
- One dinner

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