



SASUOG CONGRESS 2010

7 – 9 May

Ilanga Estate, Bloemfontein

REGISTRATION FORM

Please complete and return to fax: (011) 768 1174 with proof of payment

DELEGATE DETAILS:

Title: Initials: First Name:

Surname: HPCSA No:

Profession: Cell No:

Tel No: Fax No:

E-mail:

Postal Address:

Special meal requirements: Halaal Kosher Vegetarian Other

REGISTRATION CATEGORY

- SPECIALISTS
- GENERAL PRACTITIONERS
- REGISTRARS
- NURSES MIDWIVES & SONOGRAPHERS
- PARTNERS/SPOUSES
- TRADE DELEGATES

Early bird registration

(on or before 15 February 2010)

- R2 500.00
- R2 000.00
- R1 500.00
- R1 300.00
- R 350.00
- R1 000.00

Late registration

(after 15 February 2010)

- R2 800.00
- R2 300.00
- R1 800.00
- R1 500.00
- R 500.00
- R1 400.00

DAY REGISTRATION:

- Friday 7 May 2010 R1 200.00 R1 400.00
- Saturday 8 May 2010 R1 200.00 R1 400.00
- Sunday 9 May 2010 R 800.00 R1 000.00

PRE-CONGRESS WORKSHOP: Will be held from 08h00 - 17h00 at Universitas Hospital 6 May 2010

- Basic Ultrasonography Workshop R 600.00 R 700.00

Please note that the above workshop is limited to 50 delegates only

SOCIAL FUNCTIONS - Please indicate your attendance:

Cocktail function (7 May 2010)

Yes, I will attend the cocktail function

Gala dinner (8 May 2010)

Yes, I will attend the gala dinner

FEE

R000.00 (included in registration fees)

No, I will not attend the cocktail function

R200.00

No, I will not attend the gala dinner

PAYMENT DETAILS

Direct deposits (credit card payment is not accepted)

- Name of Account: SASUOG 2010 CONGRESS
- Bank: ABSA BANK
- Account No: 4073157830
- Branch code: 632005