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**Registration for the 12<sup>th</sup> Small Animal Imaging Workshop 2017**  
 at the Werner Siemens Imaging Center (Department of Preclinical Imaging and Radiopharmacy)  
 Head of the Laboratory: Prof. Dr. Bernd Pichler

PLEASE FAX TO: +49 7071 29 4451 - + - + - + - + - + - + - + - + - + - PLEASE FAX TO: +49 7071 29 4451

First Name:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Last Name:		
Institute:		
Email:		
Phone:		
Street:	ZIP code:	
City:	Country:	
Do you agree to share your contact information with other participants? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Preferred teaching language (German only if sufficient number of requests) <input type="checkbox"/> English <input type="checkbox"/> German		
I am:	<input type="checkbox"/> Student Please provide proof	<input type="checkbox"/> University Employee <input type="checkbox"/> Company Employee
<i>Early bird rate</i>		
Registration until Oct. 21, 2016	895 €	1195 €
Payment until Oct. 31, 2016		1895 €
<i>Reduced rate</i>		
Registration until Nov. 30, 2016	995 €	1295 €
Payment until Dec. 15, 2016		1995 €
<i>Regular rate</i>		
Registration after Nov. 30, 2016	1095 €	1395 €
Payment due on Jan. 16, 2017		2095 €

Select payment type:  Credit Card

Wire transfer

<b>Credit Card Information</b>	
Card Type:	<input type="checkbox"/> Visa <input type="checkbox"/> Master
	<input type="checkbox"/> Other:
Cardholder Name:	
Card Number:	
Exp. Date:	
Signature:	_____

<b>Bank information for wire transfer</b>
Account Holder: Universitaetsklinikum Tuebingen
Bank Name: BW BANK STUTTGART
Account #: 7477 503 793
BLZ: 600 501 01
IBAN: DE 41600501017477503793
SWIFT: SOLA DE ST
<b>Please indicate following reference: D.33.02997 B. Pichler</b>

With my signature I agree to the terms and conditions (see [www.preclinicalimaging.org](http://www.preclinicalimaging.org)) of this workshop and make a binding reservation:

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Please note:**

- **Payment needs to be received at or before specified times to grant specified rates. Also, a reservation for the participation is only guaranteed if payment or proof of payment is received in due time.**
- **Workshop participants have to take care of health insurance under their own responsibility.**

**Cancellation policy:**

Cancellation by November 2, 2016: Cancellation fee: 50 €+ potential costs for transfer/wiring  
 Cancellation by December 15, 2016: Cancellation fee: 150 €+ potential costs for transfer/wiring  
 Cancellation after December 16, 2016: Cancellation fee: 250 €+ potential costs for transfer/wiring  
 Cancellation after January 16, 2017: The full registration fee will be due.