



**Radiology in the Basque Country: Scientific / Social registration**

Email Address:

Last Name:  M.D.  D.O.  Dr.

First Name:

Companion Name(s)

Companion Email(s)

Badge Name(s) **(Print all names as you would like them to appear on name badges)**

Address:

City, State/Province:

Zip/Postal Code:  Country:

Phone: (home)  (work)  (mobile)

- Scientific Registration (**before** February 15, 2017): \$2,195.00
  - Scientific Registration (**after** February 15, 2017): \$2,395.00
  - Plus 5 **SAM (Self Assessment Modules)** Credits: \$250.00
  - Social Registration (companion(s)): \$475.00
- Total:

**There will be no refunds after August 15, 2017. Before then there will be a cancellation fee of \$250.00**

Payment Method:  Visa  American Express  MasterCard  Cheque

Card / Cheque #:

Exp Date:  Security Code:  Total Enclosed: \$

Authorized Signature:

**Please FAX Form to 860-356-0922**

Please complete, then print and mail with your check or money order payable to:  
Radiology International, Inc., P.O. Box 1357, Avon, CT 06001 USA, Telephone: 860-225-1700  
To pay by credit card fax to: 860.356.0922. or mail to Radiology International, Inc. or scan and email to  
denise@radiologyintl.com