

REGISTRATION FORM

Title _____

Family Name _____

First Name _____

Specialty _____

Hospital or Institute _____

Street / P.O.Box _____

Postal Code _____ City _____

Country _____ Telephone _____

Fax _____ E-mail _____

Registration Fees Physicians 550\$

Accompanying person 250\$

Children (Max 12 Year Old) 150\$

These includes: Opening Ceremony, Gala dinner, Coffe breaks, Lunches and Touristic tours (please note that all rates are inclusive of 10% VAT)

Hotel Reservations

Preferential rates available until **May 1st** for a limited number of rooms

Mövenpick Hotel and Resort

(Club Courtyard Rooms) Single 236\$ Double 260\$ Number of nights

(Club City View Rooms) Single 260\$ Double 280\$ Number of nights

TOTAL

Payment by credit card By bank transfer

Card No: _____

Cardholder's name _____

Signature _____

Expiry Date _____ Date _____

For registration online visit our website: www.infomedweb.com

All payments should be made to the order of:

Infomed International for Events

Bank Med; Bourj Hamoud Branch

Account number: 0240018889300

Chips UID: CH35040

Swift code: MEDLLBBX



International for Events s.a.r.l.
CONGRESS SECRETARIAT & ORGANIZER
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E-mail: medinfo@cyberia.net.lb
www.infomedweb.com



The Annual Congress of the
Lebanese Society of Neurosurgery
(LSNS)



The Fifth Homecoming Meeting of the
World Association of Lebanese Neurosurgeons
(WALN)

25-29 June, 2009
Mövenpick Hotel and Resort
Beirut-Lebanon

In conjunction with the



Egyptian Society
of Neurosurgical Surgeons



SBN **Brazilian Society**
of Neurosurgery



Registration and Hotel Reservation
Online submission on: www.infomedweb.com

Send your abstracts online at: www.waln.org
Deadline for Abstracts submission: **March 1st 2009**