



ICTRHN 2017 – NUTRITION & CANCER

REGISTRATION FORM

To c.lemaigre@agence-mo.com

First name : Last name :

Institution :

Service :

Address :

Zip Code : City :

Country:

Email : Phone number :

	From October 24, 2016 to May 9, 2017	From May 10 to May 20, 2017
Student, PhD student	<input type="checkbox"/> 150€	<input type="checkbox"/> 200€
Interns, Post-Doc, Health professionals	<input type="checkbox"/> 250€	<input type="checkbox"/> 300€
Clinicians, Practitioners, Reseachers	<input type="checkbox"/> 350€	<input type="checkbox"/> 450€
Industry	<input type="checkbox"/> 500€	<input type="checkbox"/> 600€
TOTAL OF THE REGISTRATION FEES €	

Gala dinner on June 22	Lunch on June 22	Lunch on June 23
<input type="checkbox"/> 50€	<input type="checkbox"/> 15€	<input type="checkbox"/> 15€
TOTAL EVENTS		
..... €		

PAYMENT

- **Check** : order : MO-ICTRHN
Address : Agence MO – 21 rue de la Varenne – 63122 Ceyrat
- **Bank transfer**
Account holder: Agence MO
IBAN: FR76 1680 6035 0004 5734 6300
344 // Establishment code: 16806 //
Counter code: 03500 // Account
number: 04573463003 // RIB Key: 44 //
BIC: AGRIFRPP868