Diagnostic and Operative Hysteroscopy  
Joint RCOG/BSGE Meeting  
27 November – 29 November 2018

REGISTRATION FORM  
Book online at www.rcog.org.uk/events for a £10 discount and instant confirmation

REGISTRATION FEE

2 DAYS (One day lecture and one day practical course)

Please select preferred date:

☐ Tuesday 27 – Wednesday 28 November ☐ Wednesday 28 November – Thursday 29 November
☐ £560 Standard Rate ☐ £505 Fellow, Member and Associate Rate
☐ £450 Trainee Rate ☐ £380 Allied Healthcare Professional Rate

1 DAY (LECTURES ONLY)  
Wednesday 28 November

☐ £355 Standard Rate ☐ £305 Fellow, Member and Associate Rate
☐ £245 Trainee Rate ☐ £230 Allied Healthcare Professional Rate

PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

RCOG Registration No. (if applicable)........................................ Sex: ☐ M ☐ F
Title (Prof/Mr/Mrs/Ms/Dr etc)........................................................................................................................
Forename(s) ...........................................................................................................................................................
Surname...................................................................................................................................................................
Department ..............................................................................................................................................................
Hospital...................................................................................................................................................................
☐ Consultant ☐ Trainee ☐ GP ☐ Staff and Associate Specialist Doctor
☐ Medical Student ☐ Retired Fellow/Member ☐ Allied Healthcare Professional ☐ Other (please state)........................................................................................................................................................................................

Special dietary needs: ☐ None ☐ Vegetarian ☐ Halal ☐ Other............
Special requirements: ☐ None ☐ Latex allergy ☐ Wheelchair access ☐ Hearing loop

Address for Correspondence

House Name/Number and Street................................................................................................................................
Town...........................................................................................................................................................................
County..................................................................................................................................................................... Postcode............................................................
Country (if not UK)....................................................................................................................................................
Daytime telephone number.........................................................................................................................................
Email address..........................................................................................................................................................
How did you hear about the conference?

☐ Email from RCOG  ☐ RCOG website  ☐ Events Catalogue  ☐ Event
☐ TOG  ☐ Specialist Society  ☐ Social Media
☐ Colleague  ☐ Other website  ☐ Other publication

If you ticked “other” please tell us which .........................................................................................

☐ Please tick if you do NOT wish your hospital details to appear on the list of participants to be circulated at the conference
☐ Please tick if you would NOT like to be contacted about future RCOG conferences and courses (please note this does NOT exclude you from other RCOG mailings and standard publications)

PAYMENT DETAILS

☐ I enclose a cheque made payable to “RCOG” for £ ............................................  OR
☐ Please debit my credit or debit card, as below, for £ ............................................

CREDIT CARD PAYMENTS

☐ Visa  ☐ Eurocard  ☐ Delta  ☐ MasterCard  ☐ Switch  ☐ Maestro

We regret we cannot accept payment by American Express, Solo or Visa Electron

Card Number: □□□□/□□□□/□□□□/□□□□

Expiry Date: □□/□□

Security Code (last 3 digits on the signature strip on the back of the card): □□□

IMPORTANT - If paying by Switch please include your Issue No: □□□ or Valid from date: □□/□□□

PLEASE NOTE THAT WE CANNOT PROCESS YOUR REGISTRATION UNLESS FULL CARD DETAILS (INCLUDING SECURITY CODE AND THE ADDRESS THE CARD IS REGISTERED TO ARE PROVIDED.

IF YOUR REGISTRATION FEE IS TO BE PAID BY YOUR HOSPITAL AND/OR EMPLOYER, WE WILL REQUIRE A REQUEST FROM THEM ON OFFICIAL LETTERHEAD AND PURCHASE ORDER BEFORE WE CAN RESERVE YOU A PLACE. PAYMENT IS REQUIRED BEFORE THE EVENT.

Name and address of cardholder (if different to the details above)

Name of cardholder........................................................................................................................................................................

GENERAL INFORMATION AND TERMS AND CONDITIONS

Fee and payment

Fees must be paid in full before the first day of the meeting. The RCOG reserves the right to refuse admission in the event of non-payment.
The fee includes refreshments, lunch, admission to the lectures and any technical exhibitions.

Cancellations

Cancellations must be received in writing by Tuesday 13 November 2018 and be accompanied by a copy of your confirmation letter and receipt. An administrative charge of £25 will be made on all cancellations received before or on the above date. We regret the College cannot refund fees after this date. Cancellations will be
Payment may be made by debit/credit card via our website at www.rcog.org.uk/events

Cheques should be made payable to “RCOG”. Payments from abroad should be by international bankers draft or money order in sterling. Payment in other currencies will not be accepted.

Places booked by post, fax or telephone will be confirmed within 14 days of receipt of payment. You are not guaranteed a place until you receive this confirmation.

Booking online provides you with immediate confirmation of your place and receipt of payment by email.

If you have not received confirmation of your place before the start of the event, please telephone the Conference Office on 020 7772 6245.

All registered retired Fellows and Members of the RCOG are entitled to a 50% discount on the member rate registration fee (please state if you are retired at the time of booking).

Venue and Correspondence
RCOG, 27 Sussex Place, Regent’s Park, London NW1 4RG. Tel: 020 7772 6200 Fax: 020 7772 6388

Train: Marylebone Station - 10 minute walk
Underground: Baker Street - 10 minute walk
Parking: Regent’s Park Outer Circle (pay and display), NCP on corner of Park Road and Rossmore Road, Tel: 0870 242 7144 for further information.

processed after the conference. Substitutions are welcome at any time.

In the unlikely event the course is cancelled by the RCOG, we regret we are unable to refund any travel and/or accommodation costs that have already been incurred by the delegate, or any administration charges relating to cancellation of travel tickets or accommodation.

Data Protection Act
The details you provide on this form will be held and processed in order to administer your registration. Your name, department, hospital name and town will be included on the list of participants that will be issued to delegates, speakers, sponsoring companies and other interested parties involved in the conference.

We will keep your contact details on record in order to inform you of future RCOG conferences and courses. If you do not wish your details to be used in this manner, please tick the appropriate boxes on the registration form.

For full terms and conditions please visit www.rcog.org.uk/events/terms-and-conditions

Accommodation
Please visit www.rcog.org.uk/events/accommodation for local accommodation and delegate rate information.

REGISTER TODAY
w www.rcog.org.uk/events t +44 (0)20 7772 6245

Conference Office
Royal College of Obstetricians and Gynaecologists
27 Sussex Place, London, NW1 4RG
Registered Charity No: 213280