

**SIDCO**



**XXXIII SIDCO National Congress**  
Italian Society of Surgical  
and Oncological Dermatology

**ISDS**



**XXXIX ISDS Annual Meeting**  
International Society for  
Dermatologic and Aesthetic Surgery

**Basic and advanced dermatologic surgery course  
on HIGH-FIDELITY artificial models  
June 7<sup>th</sup> 2018**

**REGISTRATION FORM**

Congress Venue:  
Angelicum - Pontificia Università San Tommaso d'Aquino  
(Pontifical St. Thomas Aquinas University)  
Largo Angelicum 1, 00184 Roma

**The registration form must be sent to the following e-mail address:**

[roberta.bianchi@nicocongressi.it](mailto:roberta.bianchi@nicocongressi.it)

**PERSONAL AND INVOICING DETAILS:**

NAME SURNAME: \_\_\_\_\_ Nationality \_\_\_\_\_

E-mail: \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile \_\_\_\_\_

VAT Number or Social Security Number (MANDATORY) \_\_\_\_\_

**Work Information:**

Profession: \_\_\_\_\_

Discipline: \_\_\_\_\_

Department/ Institute: \_\_\_\_\_

*Pursuant to the Italian Privacy Law 196/03, please be informed that your personal data will be processed confidentially by NICO srl*

I agree to these terms

Date \_\_\_\_\_ Signature \_\_\_\_\_

**REGISTRATION FEES (VAT 22% included)**

<b>Basic level (artificial surgical pads temporary use only)</b>	<b>€ 100,00</b>
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<b>Advanced level (artificial surgical pads temporary use only)</b>	<b>€ 300,00</b>
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Basic Level Course: Limited number of attendees, 15

Advanced Level Course: Limited number of attendees, 10

The registration will be confirmed upon receipt of payment, on a first-come-first-serve basis.

Registration fee includes: Certificate of attendance and ECM certificate (if requested) to be sent within 90 days from the end of the course.

The registration form must be sent to the Organizing Secretariat NICO srl via e-mail to [roberta.bianchi@nicocongressi.it](mailto:roberta.bianchi@nicocongressi.it) - not later than **15th April 2018** or to the fax number 0039 055 8797843.

Please enclose a copy of the bank transfer (for the entire amount) made payable to:

**Bank Details:****NICO SRL****Banco Fiorentino - Mugello Impruneta Signa C/C: 000000204218****ABI: 08325 CAB: 38110****IBAN: IT68D0832538110000000204218****SWIFT: ICRAITRR910****CONTACT INFORMATION**

Organizing Secretariat

LOCAL MEETING ORGANIZER



NICO srl

Contact Person: Roberta Bianchi

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