**INTERNATIONAL CONFERENCE ON LYMPHOMAS**

28-30 October 2012
Marseille, France
Chairs: A. M. Carella, B. Coiffier, P. Johnson

**HOTEL REGISTRATION FORM**

Please complete and return this form to id2mark by mail, fax or e-mail:

id2mark
Cité de la Cosmétique
2 rue Odette Jasse
13015 Marseille, France
Phone: +33 4 91 03 42 33
Fax: +33 4 26 30 34 57
Email: eshmars@id2mark.com

All fields are required.

**PERSONAL INFORMATION**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Family Name</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Nationality</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Title</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Dept/Lab</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Institution</td>
<td>…………………………………………………</td>
</tr>
<tr>
<td>Address</td>
<td>…………………………………………………</td>
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<tr>
<td>Code</td>
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<tr>
<td>City</td>
<td>…………………………………………………</td>
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<tr>
<td>Country</td>
<td>…………………………………………………</td>
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<tr>
<td>Work phone</td>
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<tr>
<td>Fax</td>
<td>…………………………………………………</td>
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<tr>
<td>Email</td>
<td>………………………………………………… (in typewriting letters, please)</td>
</tr>
<tr>
<td>Gender</td>
<td>F □ M □</td>
</tr>
</tbody>
</table>

Email: eshmars@id2mark.com
Phone +33 4 91 03 42 33 - Fax +33 4 26 30 34 57
id2mark, Cité de la Cosmétique, 2 rue Odette Jasse, 13015 Marseille, France
# ACCOMMODATION

## Pullman Marseille Palm Beach****

200 Corniche J.F. Kennedy

13007 Marseille, France

<table>
<thead>
<tr>
<th>ROOM TYPE</th>
<th>ROOM RATE (A)</th>
<th>Tick your choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single room (1 king-size bed)</td>
<td>202 € / night</td>
<td>☐</td>
</tr>
<tr>
<td>Double room (1 king-size bed)</td>
<td>226 € / night</td>
<td>☐</td>
</tr>
<tr>
<td>Twin room (2 beds) (2 attendees)</td>
<td>267 € / night</td>
<td>☐</td>
</tr>
</tbody>
</table>

Rates are per room / day and include VAT. Rates do NOT include a city tourist tax (1.80 € / person / day).

“Palm Beach” dinner = 3 course meal + beverages package (1 bottle of wine for three people - white, red and rosé; still and sparkling waters; coffee)

---

Arrival date: ..................................................  Departure date: ..................................................

No. of nights (B): ..............................................

No. of persons (C): ..............................................

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Room rate (A)</th>
<th>x No. of nights (B)</th>
<th>= ........................</th>
</tr>
</thead>
<tbody>
<tr>
<td>City tourist tax</td>
<td>No. of nights (B)</td>
<td>x No. of persons (C)</td>
<td>x 1.80 €</td>
</tr>
</tbody>
</table>

TOTAL (1) = ..............................................

We strongly recommend you to make your reservation until October 1, 2012 to guarantee space availability.

For further accommodation solutions, please contact us.
DINNER

Would you need any additional “Palm Beach” dinner at the Pullman Marseille Palm Beach?

“Palm Beach” dinner = 3 course meal + beverages package (1 bottle of wine for three people - white, red and rosé; still and sparkling waters; coffee)

Dinner price: 42 € / person / dinner, VAT included

<table>
<thead>
<tr>
<th>Date</th>
<th>No. of dinners</th>
<th>Price (€)</th>
<th>Total (€)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saturday, October 27th</td>
<td>………………</td>
<td>x 42 €</td>
<td>= …………..</td>
</tr>
<tr>
<td>Sunday, October 28th</td>
<td>………………</td>
<td>x 42 €</td>
<td>= …………..</td>
</tr>
<tr>
<td>Monday, October 29th</td>
<td>………………</td>
<td>x 42 €</td>
<td>= …………..</td>
</tr>
<tr>
<td>TOTAL (2)</td>
<td></td>
<td></td>
<td>= …………..</td>
</tr>
</tbody>
</table>

We strongly recommend you to make your reservation until October 1, 2012 to guarantee table availability.

SPECIAL REQUESTS

Please indicate any special requests: hypoallergenic bedding, special diet...

……………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………

ACCOMMODATION & DINNER FEE

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>TOTAL (1)</th>
<th>= …………..</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dinner</td>
<td>TOTAL (2)</td>
<td>= …………..</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>= …………..</td>
</tr>
</tbody>
</table>

Your accommodation & dinner will be definitively reserved upon receipt of your fee.
PAYMENT

Your fee may be paid

by cheque and sent to id2mark (see address above)

by credit card

   Visa / Mastercard – Transaction fee = 10 €
   AmEx – Transaction fee = 2.95 % of the total amount

Please complete the Credit Card Authorization Form

OR

by bank transfer to: CREDIT-DU-NORD, 49 rue Grignan, 13006 Marseille, France

   Bank code: 30076  Agency code: 02204  Account number: 43553600200  Key: 76
   IBAN: FR76 3007 6022 0443 55 36 0020 076  SWIFT BIC: NORDFRPP

IMPORTANT NOTES: In the Bank Transfer Form, please indicate "ESH Marseille 2012 Name / Company".

Any transaction fee must be charged to you, not to the recipient of the transfer.

INVOICE

Do you need an invoice? No [ ] Yes [ ]

Please indicate name and contact information (address) for the invoice:

........................................................................................................................................
........................................................................................................................................

CANCELLATION POLICY OF REGISTRATION FEE

Cancellation or change of your reservation made less than 15 days prior to the beginning of the event will result in the loss of your payment, with no reimbursement.

Cancellation or change of your reservation made less than 30 days prior to the beginning of the event are subject to a 50% cancellation fee, plus any transaction fees.

If the cancellation or change of your reservation is made 30 days or more prior to the beginning of the event date, we will reimburse the total cost, minus any transaction fees.

Cancellation or change of your reservation notified during the meeting will not be reimbursed.
CREDIT CARD AUTHORIZATION FORM

Please complete and return this form to id2mark by mail, fax or e-mail:

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Cité de la Cosmétique
2 rue Odette Jasse
13015 Marseille, France
Phone: +33 4 91 03 42 33
Fax: +33 4 26 30 34 57
Email: eshmars@id2mark.com

Please enter your personal information and credit card details as instructed.
All information will remain confidential.

CONGRESS ATTENDEE(s): ____________________________________________________________

Cardholder / company name: _________________________________________________________

Card type:  ☐ Visa  ☐ Mastercard  ☐ American Express

We do not accept other cards.

Card number: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Expiry date: __ __ / __ __ __ __

Card security code: __ __ __

Please indicate the 3 or 4 digit number found on the back (Visa & Mastercard) or front (AmEx) of your card.

Amount to charge: ________________________________ euros (€)

+ transaction fee:  ☐ 10 € for Visa / Mastercard  ☐ 2,95 % of the amount listed above for American Express

I hereby authorize SARL iD2MARK to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank holder agreement. This payment authorization is for the amount indicated above only and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

If the name on the credit card or debit card is in the name of a corporation or other business entity, please print the signer’s name:

__________________________________________________________

Cardholder’s signature:

__________________________________________________________

Date:

__________________________________________________________

Personal information:
Telephone, fax and/or e-mail

__________________________________________________________

Please double-check your details – If they are incorrect, we may have to return your form.

Your signature on this form indicates acceptance of these terms and authorizes us to charge the amount of the invoice(s) to your card.