

Delegate Registration Form

Please complete the form, and mail or fax to:

Secretariat "Hands-on Workshop on EUS/ERCP & Indonesian Digestive Disease Week (IDDW) 2019"

C/o Menteng Square Apartment, Tower A No. 6

Jl. Matraman Raya No. 30E

Jakarta 10430-Indonesia

Phone +6221- 3148680/29614303

Fax +6221-3148681/23951145

Email iddw.gastroenterology@gmail.com

Website iddw2019.com

Yes, I will attend:

- Hands-on Workshop on EUS/ERCP
 Indonesian Digestive Disease Week (IDDW)

Prof. DR. Dr. Mr. Mrs. Ms. (Please tick v)

Name :

Institution :

Phone :

E-mail :

Sponsor:..... Contact Person Phone

E-mail :

	Domestic Participants		Foreign Participants	
	Early Bird Rate Valid until 15 January 2019	Regular Rate & Onsite	Early Bird Rate Valid until 15 January 2019	Regular Rate & Onsite
Hands-on Workshop on EUS/ERCP + IDDW	IDR 9.500.000	IDR 11.000.000	US\$ 850	US\$ 950
Indonesian Digestive Disease Week (IDDW) 2019 (Symposium Only)				
GP/ Resident*, Nurse	IDR 2.000.000	IDR 2.500.000	US\$ 150	US\$ 180
Specialist	IDR 4.000.000	IDR 4.500.000	US\$ 350	US\$ 400

* Resident will get 50% discount from the above fee, and need to obtain statement letter from the institution

METHOD OF PAYMENT

IDR

Name : PT Multi Taruna Sejati

Account : 123-0007-385-562

Bank : Mandiri Jakarta Universitas Yarsi

USD

Name : PT Multi Taruna Sejati

Account : 123-0004-713-535

Bank : Mandiri Branch Universitas Yarsi

Swift Code : BMRIIDJA