

4–7 April 2019

# REGISTRATION FORM

## PRACTICE BADGE – NURSING

PLEASE COMPLETE THE FORM AND RETURN BY EMAIL TO CONGRESS@BSAVA.COM, FAX TO 01452 726701, OR POST TO CONGRESS DEPT., BSAVA, WOODROW HOUSE, 1 TELFORD WAY, QUEDGELEY, GLOUCESTER GL2 2AB.

### MEMBER DELEGATE DETAILS

Please note that one practice badge attendee must be a BSAVA Member. \*Denotes this field is mandatory.

MEMBERSHIP NO* (if applicable)	NAME*
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Please fill in daytime contact details

TELEPHONE	EMAIL*
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### POSTAL ADDRESS

(e.g. home/practice)

NAME OF PRACTICE			
PRACTICE ADDRESS*			
TOWN*	COUNTY	POSTCODE*	COUNTRY*
CONTACT EMAIL FOR QUERIES*		BOOKER TELEPHONE NUMBER FOR QUERIES*	

**IMPORTANT!** For security reasons the name of each attendee on each day **MUST** be completed below. Failure to complete means we will not be able to process your registration.

<b>THURSDAY</b>	NAME	MEMBERSHIP NUMBER	ROLE
	EMAIL		
<b>FRIDAY</b>	NAME	MEMBERSHIP NUMBER	ROLE
	EMAIL		
<b>SATURDAY</b>	NAME	MEMBERSHIP NUMBER	ROLE
	EMAIL		
<b>SUNDAY</b>	NAME	MEMBERSHIP NUMBER	ROLE
	EMAIL		

SPECIAL DIETARY REQUIREMENTS (if applicable). Please detail any special dietary requirements for anyone listed above.

DAYS ATTENDING	PLEASE TICK [✓] DAYS ATTENDING				QUANTITY	COST £GBP NOT AVAILABLE AFTER 1 MARCH 2019	COST (including VAT) £GBP
	THURSDAY 4 APRIL	FRIDAY 5 APRIL	SATURDAY 6 APRIL	SUNDAY 7 APRIL			
<b>BSAVA PRACTICE BADGES</b>							
BSAVA PRACTICE BADGE – 1 NURSE PER DAY – WHOLE CONGRESS	WHOLE CONGRESS					272.00	
<b>FAMILY PASSES</b>							
STANDARD FAMILY BADGE <i>(allows entry to Exhibition only)</i>	THURS	FRI	SAT		DAY RATE	FREE	
ENHANCED FAMILY BADGE <i>(includes lunch and drink)</i>	THURS	FRI	SAT	SUN	DAY RATE	15.00	
CRÈCHE	THURS	FRI	SAT	SUN	DAY RATE	30.00	
<b>TOTAL REGISTRATION COST (inc. VAT)</b>							

PRACTICAL WORKSHOPS AND SMALL GROUP SESSIONS			PLEASE TICK [✓] PRACTICAL WORKSHOP(S) YOU WISH TO ATTEND	NAME(S) OF DELEGATE(S) ATTENDING PRACTICAL SESSION	COST (including VAT) £GBP
<i>Practical Workshop tickets and Small Group Session tickets are only available to delegates who are fully registered on the relevant day. Offsite Veterinary Wet Lab hosted at Birmingham Medical School; transport is provided.</i>					
<b>THURSDAY 4 APRIL</b>					
BREAKFAST WITH A SPECIALIST	Breakfast with a specialist – Gary England	08:00–09:00			25.00
WETLAB	Dental radiography *	09:00–11:00			100.00
WETLAB	Rabbit dentistry *	09:00–11:00			100.00
WETLAB	Basic eye surgery *	09:00–12:00			100.00
WETLAB	Dental radiography *	12:00–14:00			100.00
WETLAB	Rabbit dentistry *	12:00–14:00			100.00
SMALL GROUP SESSION – OPEN TO ALL	Dispensing errors	13:15–14:45			20.00
WETLAB	Basic eye surgery *	14:00–17:00			100.00
SMALL GROUP SESSION	Emergency thoracic and abdominal radiology	14:00–17:00			20.00
WETLAB	Dental radiography *	15:00–17:00			100.00
WETLAB	Rabbit dentistry *	15:00–17:00			100.00
<b>FRIDAY 5 APRIL</b>					
BREAKFAST WITH A SPECIALIST	Breakfast with a specialist – Jon Bray	08:00–09:00			25.00
PRACTICAL	Flexible endoscopy	09:00–10:30			75.00
SMALL GROUP SESSION – VN	Anaesthesia: case-based discussions	09:45–12:45			20.00
PRACTICAL	Flexible endoscopy	11:15–12:45			75.00
SMALL GROUP SESSION	Obesity: turning failure into success	14:00–17:00			20.00
PRACTICAL	Flexible endoscopy	15:00–16:30			75.00
<b>SATURDAY 6 APRIL</b>					
BREAKFAST WITH A SPECIALIST	Breakfast with a specialist – Karen Perry	08:00–09:00			25.00
PRACTICAL	Drains	08:30–11:30			75.00
SMALL GROUP SESSION	Reptile anaesthesia, analgesia and sedation	08:30–11:30			20.00
SMALL GROUP SESSION	Ocular emergencies	09:30–12:30			20.00
SMALL GROUP SESSION	Extraction complications in cats & dogs: prevention and treatment	14:00–17:00			20.00
<b>SUNDAY 7 APRIL</b>					
SMALL GROUP SESSION – VN	Better vet visits: working towards fear free practice	10:15–12:15			20.00
<b>TOTAL PRACTICAL WORKSHOP AND SMALL GROUP SESSION COST (inc. VAT)</b>					

\* Transport provided

<b>SOCIAL PROGRAMME TICKETS</b> <i>Please email (congress@bsava.com) or fax us with any additional special dietary requirements.</i>		<b>NO. OF TICKETS REQUIRED</b>	<b>NAME(S) OF DELEGATE(S) ATTENDING</b>	<b>PRICE PER PERSON (including VAT) (GBP)</b>	<b>COST (including VAT) (GBP)</b>
<b>THURSDAY 4 APRIL</b>					
16:00	PRESIDENTIAL WELCOME AND BSAVA LECTURE – HALL 1, ICC	Automatically included within your registration and does not have to be requested.		FREE	N/A
20:00	MOVIE NIGHT – ICC – (Movie 1) – Film to be announced later this year			7.50	
<b>FRIDAY 5 APRIL</b>					
20:00	MOVIE NIGHT – ICC – (Movie 2) – Film to be announced later this year			7.50	
20:00	PRESIDENT'S SOIREE – Birmingham Museum and Art Galley			65.00	
<b>SATURDAY 6 APRIL</b>					
	V19 BEACH PARTY – ICC	Including food		34.00	
		Without food		25.00	
<b>TOTAL SOCIAL PROGRAMME TICKET COST (inc. VAT)</b>					

<b>PAYMENT FOR BSAVA CONGRESS 2019</b> <i>Please note: registration forms will not be processed unless accompanied by payment.</i>		
<b>TOTAL REGISTRATION COST</b>	£	GBP
<b>TOTAL PRACTICAL WORKSHOPS AND SMALL GROUP SESSIONS COST</b>	£	GBP
<b>TOTAL SOCIAL PROGRAMME TICKET COST</b>	£	GBP
<b>OPTIONAL £1 CHARITY DONATION – PETAVERS</b> <input type="checkbox"/> I would like to make a £1 donation to PetSavers	£	GBP
<b>OPTIONAL £1 CHARITY DONATION – VETLIFE</b> <input type="checkbox"/> I would like to make a £1 donation to Vetlife	£	GBP
<b>TOTAL COST FOR BSAVA CONGRESS 2019</b> <i>(including VAT at the current rate)</i>	<b>£</b>	<b>GBP</b>

### INVOICE ADDRESS

*(If different to postal address on page 1)*

NAME*	
ADDRESS*	
CONTACT TELEPHONE*	CONTACT EMAIL*

## TERMS AND CONDITIONS

Full booking terms and conditions can be found on [www.bsavacongress.com](http://www.bsavacongress.com).

BSAVA will send you essential communications via email to fulfil our obligations to you as a Congress delegate. We will send you information on BSAVA Congress 2019 and for the next three years. You can opt out at anytime on [www.bsava.com](http://www.bsava.com) or by contacting [congress@bsava.com](mailto:congress@bsava.com).

In completing this form I agree to the Congress booking terms and conditions and the BSAVA privacy policy, available on [www.bsava.com](http://www.bsava.com).

Signature..... Date .....

## PAYMENT

### PAYMENT BY CHEQUE

I enclose a cheque for £ (GBP) ..... made payable to the BSAVA.

Please write your name, address and membership number (or name and address of payer if different) clearly on the back of your cheque.  
Payment in Euros – for more information please contact [finance@bsava.com](mailto:finance@bsava.com).

### PAYMENT BY CREDIT/DEBIT CARD

We accept payment by Mastercard, Visa or American Express.\* (Please delete as applicable and quote Card Number & Expiry Date)



\*For non-UK credit card transactions we may use the Dynamic Currency Conversion (DCC) to calculate the rate of exchange on date processed.

Card number

Valid from   /

Expiry Date   /

Security Code     Last 3 digits on back of card; Amex: 4 digits on front of card

Name on the card .....  
(IN BLOCK CAPITALS)

Signature .....