



## Registration Form

### The 16<sup>th</sup> Pan Arab Orthopaedics Association (PAOA) & The 8<sup>th</sup> Jordanian Orthopedic Association Congress

**Nov 23-27, 2011**

**Le Royal Hotel, Amman**

Full Name:

Title:  Specialty:

Institution:  Nationality:

Address:

Phone:  Fax:

Cellular:  E-mail:

No. Of Accompanying Persons:  Name of Accom. Person :

**Registration fees (Please tick your choice):**

- o International Participants*  *US\$ 200*
- o Accompanying Person*  *US\$ 75*
- o Member of Jordanian Orthopedic Association*  *JOD 50*
- o Local Participants (Other Specialists)*  *JOD 100*
- o Residents*  *JOD 20*
- o House offices & Medical Students (attend Scientific Sessions)*  *FREE*  
*(pre registration is required)*

**The Registration fees includes:** Access to the scientific sessions, exhibition, lunches, coffee breaks, and congress bag which includes a certificate of attendance, and abstract book with final program.

**Total amount to be paid in US\$:**

*Please fax or email a copy of the registration form & bank transfer receipt to: (962) (6) (461-8558)  
Or by email: [info@jordan-valley.com](mailto:info@jordan-valley.com)*

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

*For more information; please contact:*

Tel: +962 6 461 8448 Fax: +962 6 461 8558  
Cellular: +962 79 5772707 / +962 777300252  
E-mail: [info@jordan-valley.com](mailto:info@jordan-valley.com)