



23rd International Congress on Palliative Care

Palais des Congrès, Montréal, Canada
October 18 - 21, 2022

For office use only
#

Registration Form

Please scan and email, fax or mail your completed form, along with your payment, to:

PAL 2022 Congress Secretariat

c/o O'Donoghue & Associates Event Management Ltd.
75 chemin Mountain, Mansonville, Québec, Canada J0E 1X0
Tel: +1 450-292-3456 ext. 227 Fax: +1 450-292-3453
E-mail: registration@pal2022.com Web site: www.pal2022.com

Please use one form per participant.

A. IDENTIFICATION *(Please print legibly)*

Prefix *(Please circle one)*: Prof. / Dr. / Mr. / Ms. / Mrs. / Other

.....
Last Name

.....
First Name

.....
Title/Position

.....
Department/Division

.....
Organization

.....
Address

.....
City

.....
Province / State

.....
Country

.....
Postal / Zip Code

.....
Telephone

.....
Fax

.....
E-Mail

Perspective *(check one)*:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Physician | <input type="checkbox"/> Administrator | <input type="checkbox"/> Psychologist | <input type="checkbox"/> Physical or Occupational Therapist |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Pharmacist | <input type="checkbox"/> Pastoral Care Worker | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Volunteer | <input type="checkbox"/> Social Worker | <input type="checkbox"/> Music Therapist | <input type="checkbox"/> Educator/Teacher |
| <input type="checkbox"/> Other <i>(please specify)</i> | | | |

- Please check this box if you **do not want** your e-mail address information to appear on the list of participants which may be distributed to participants.

B. SPECIAL NEEDS Please indicate any special needs you may have (e.g. dietary, wheelchair access, etc.)

.....
Please complete both pages of this form.

C. CONGRESS REGISTRATION FEES (Fees include taxes: GST# 878868660 RT, QST# 1020752421)

	Before March 31, 2021	Before March 31, 2022	Before August 1, 2022	After August 1, 2022
1. Full Congress – Regular	<input type="checkbox"/> \$875 CAN	<input type="checkbox"/> \$930 CAN	<input type="checkbox"/> \$1,040 CAN	<input type="checkbox"/> \$1,145 CAN
2. Full Congress – Student*	<input type="checkbox"/> \$420 CAN	<input type="checkbox"/> \$445 CAN	<input type="checkbox"/> \$475 CAN	<input type="checkbox"/> \$545 CAN
3. Full Congress – Developing Countries **	<input type="checkbox"/> \$450 CAN	<input type="checkbox"/> \$450 CAN	<input type="checkbox"/> \$475 CAN	<input type="checkbox"/> \$545 CAN
4. Individual Days – Regular	<input type="checkbox"/> \$280 CAN x No. of days = ____	<input type="checkbox"/> \$300 CAN x No. of days = ____	<input type="checkbox"/> \$350 CAN x No. of days = ____	<input type="checkbox"/> \$375 CAN x No. of days = ____
5. Individual Days – Student*	<input type="checkbox"/> \$190 CAN x No. of days = ____	<input type="checkbox"/> \$200 CAN x No. of days = ____	<input type="checkbox"/> \$200 CAN x No. of days = ____	<input type="checkbox"/> \$245 CAN x No. of days = ____
6. Individual Days – Palliative Care Volunteer †	<input type="checkbox"/> \$115 CAN x No. of days = ____	<input type="checkbox"/> \$120 CAN x No. of days = ____	<input type="checkbox"/> \$120 CAN x No. of days = ____	<input type="checkbox"/> \$120 CAN x No. of days = ____
Please indicate which days you are registering for: <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday				

All fees are shown in Canadian funds and include access to sessions, the Welcome Reception, access to the Exhibit Hall and Congress publications.

* Proof of full-time student status required, i.e. copy of current student card or letter from your programme director.

** Available ONLY to participants residing in from countries listed as “Low income” and “Lower middle income” countries by the World Bank. Please refer to our website for the list. Proof of residence required.

† Welcome Reception not included. Please provide a letter on letterhead from your volunteer coordinator to qualify for this rate.

D. METHOD OF PAYMENT

Registration Fee (from above): \$ CAN

Option 1: Cheque or Bank Draft

Cheque or Bank Draft enclosed for the total amount shown above, payable to “O’Donoghue & Associates re: PAL”.

Cheques from outside Canada or the USA must include the complete name and branch/ mailing address of a Canadian or USA bank through which they may be cashed. Post-dated cheques are not acceptable.

Option 2: Credit Card

MasterCard VISA AMEX Discover

Credit Card # Expiry Date CVV/CID#

Cardholder Name

I hereby authorize **O’Donoghue & Associates Event Management Ltd.** to debit the “Registration Fee” indicated above from my credit card and I acknowledge having read the cancellation policy.

Signature of cardholder Date

Please note that this transaction will appear on your next statement under “O’Donoghue & Associates”. It will reflect the conversion rate at the time of transaction (if applicable). Should there be an error in the sum of the total above, O’Donoghue & Associates reserves the right to charge the correct total Canadian \$ amount.

CANCELLATION POLICY

For written cancellations received:

- **by December 15, 2021:** full refund, less an administration fee of \$50.00 will be made;
- **between December 16, 2021 and August 19, 2022:** 75% will be refunded;
- **after August 19, 2022:** no refund will be issued.

All approved refunds will be issued after the Congress.

Please complete both pages of this form.