



REGISTRATION FORM

Dr. / Mr. / Ms.

Name (*as you would like it to appear on your name badge*):

Title: _____

Affiliation: _____

Address: _____

City: _____ Prov/State: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Fees:

Early Bird Rate (on or before the 1st Friday in October) \$325 Cdn/ \$270 US

Regular Registration (after the 1st Friday in October) \$385 Cdn / \$320 US

Closing Dinner Fee:

Registered participants - \$20 Cdn / \$16 US

Non-registered participants - \$125 Cdn / \$100 US

Registration Details:

Thursday, November 3, 2005

[] 9:30 – 11:00 Case Studies in Onychomycosis

[] 2:00 – 3:30 Shaping the Management of Psoriasis – Achieving Long-Term Control with Efalizumab

[] 4:00 – 5:30 Taking Control over Eczema: How to meet patients' needs

Friday, November 4, 2005

[] 9:30 – 11:00 New Comparative Data in the Treatment of NMSC and Insights into the Future

[] 11:30 – 3:30 Psoriatic Arthritis and Psoriasis - A 2005 Clinical Management

[] 2:00 – 3:30 Redefining Efficacy in Psoriasis

Saturday, November 5, 2005

[] 8:00 – 5:30 Plenary Sessions \$ _____

[] 7:30 – 10:00 Closing Dinner \$ _____

Sunday, November 6, 2005

[] 8:30 – 11:00 Clinical Trial Workshop \$ _____

Sub-total \$ _____

Add GST (7% Cdn Residents, 3% Non Residents) \$ _____

Total Enclosed \$ _____

NOVEMBER 3RD – 4TH WORKSHOPS AND ADVISORY BOARDS
NOVEMBER 5TH PLENARY SESSIONS

MONTREAL
2005
NOVEMBER 3RD – 6TH



Method of Payment

Cheque enclosed (payable to *Dermatology International*) Visa MasterCard

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