GROUP REGISTRATION FORM

1. The group registration process is valid for a minimum of 10 delegates.

2. In order to facilitate your group registration, please fill out this form and return by email to: reg_icid22@kenes.com.

3. In order to benefit from the reduced group registration fees, payments must be paid prior to the below deadlines.

4. Please send the final name list no later than 4 weeks prior to the congress. Please do not send preliminary name lists.

5. Name changes will be permitted free of charge until 2 weeks prior to the congress (up to 15% of the participants names). After this date, any name change will be subject to 30 USD charge per name.

6. Onsite group registration pick-up for groups leaders will be available upon request.

7. Payment is accepted by credit card or bank transfer. Credit card payment is subject to additional 4% commission.

8. Cancellation policy:

All cancellations must be emailed prior to the below deadline:
Registration cancellations received up to and including October 1, 2022 by midnight Eastern Standard time – full refund (minus an administrative fee of $100.00 USD)

As of October 2, 2022 – refunds will not be possible!

Registration for the In-Person Congress includes:
• Admission to Plenary sessions, Scientific sessions, Policy discussions and Meet-the-Expert sessions
• Opportunity to purchase and attend Pre-Congress Workshops
• Earn CME credits by attending the scientific sessions and Pre-Congress Workshops
• Opening ceremony and welcome reception (1 person)
• Access to the commercial exhibition
• Access to Poster displays
• Delegate kit and Congress materials

Registration for the Virtual Congress includes:
• Open access to all presentations and session recordings. Create your own schedule, attend any and all of the sessions whenever and wherever for a period of three months.
• Earn CME credits. Participate in the scientific program, and be eligible to receive the number of CME credits attributed to the virtual meeting.
• Access to all the e-posters. Browse research on the hottest topics published on the Congress digital portal.
• Join the debate. Attend a session recorded and streamed live to allow participation delegates from all over the world to participate in live conversations.
• Give feedback. Use the short session surveys to rate the sessions and help us improve the overall quality of the program.
REGISTRATION CATEGORIES

Fees apply to payments received prior to the indicated deadlines.

<table>
<thead>
<tr>
<th>Registration Category: In-Person* or Virtual</th>
<th>Registration Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular – Early registration EXTENDED to July 15, 2022</td>
<td>$575.00 USD</td>
</tr>
<tr>
<td>Regular</td>
<td>$850.00 USD</td>
</tr>
<tr>
<td>Regular – Late registration begins October 1, 2022</td>
<td>$950.00 USD</td>
</tr>
<tr>
<td>Student / Early Career Researcher – Early registration EXTENDED to July 15, 2022</td>
<td>$300.00 USD</td>
</tr>
<tr>
<td>Student / Early Career Researcher</td>
<td>$400.00 USD</td>
</tr>
<tr>
<td>LMICs – Both Early and Regular registration</td>
<td>$300.00 USD</td>
</tr>
</tbody>
</table>

Low- and Lower Middle-Income Countries (LMIC) countries as per World Bank: see bottom of the following web page: https://data.worldbank.org/?locations=XN-XM

LMIC fees only apply to delegates/students that are citizens and who CURRENTLY reside/live in a LMIC. If you are temporarily based in the US, the fee does not apply. You must enter your permanent LMIC mailing address.

Group Registration Details:

Pharmaceutical company name - ________

1. Required registration category: ________ No. of Registrations: __________________________
2. Required registration category: ________ No. of Registrations: __________________________
3. Required registration category: ________ No. of Registrations: __________________________

Total Group Participants: ____________

Important Note: Abstract Presenters

In case there are Abstract Presenters among the group delegates please advise the names and abstract numbers in advance in order to guarantee the abstract will remain in the Scientific Programme.

Please mark below accordingly:

☐ There are no abstract presenters in this group

☐ Attached is a list of the abstract presenters in this group

Group Registration Pick-up

Group registration collective pick-up will be available onsite, an appointment must be coordinated in advance. Exact times will be advised prior to the congress.

Note: in case of group registration pick-up, individual barcode confirmation letters will not be sent to group participants. We strongly recommend individual pick-up.
Please mark below accordingly:

☐ Group registration pick-up is required.

☐ No group pick-up, the delegates will be collecting their registrations individually.

Data Protection:

☐ I confirm that prior to transferring Kenes the group delegates contacts, our company has obtained consent from the individuals concerned.

PAYMENT DETAILS

Payment information:

Billing Address (to appear on invoice and receipt): ________________________________

VAT number: ______________________

Please select a method of payment (credit card or bank transfer):

1. Credit card payment (Credit card payment is subject to additional 4% commission):

I authorize ‘KENES International – Organizers of Congresses’ to charge the below credit card for the amount of: _______ USD. *** Please authorize the full amount, including the 4% credit card fee.

Type: Visa / MasterCard / AMEX number: ________________________________

Expiration date: ______________________ Name of Card holder: ______________________ CVC: _______

2. Bank Transfer Payment:

• Please ensure that the name of the group/paying company are stated on the bank transfer.
• Bank charges are the responsibility of the payer and should be paid at source in addition to the registration fees.

Please make drafts payable in USD only to:

Account Name: ISID 2022 Congress, Kuala Lumpur (Account holder: Kenes International)
Bank details: Credit Suisse Geneva, 1211 Geneva 70, Switzerland
Bank Code: 4835
Swift No: CRESCHZZ80A
Account Number: 1500934-92-417
IBAN No: CH08 0483 5150 0934 9241 7

This form was submitted by:

Full Name: ______________________ On Behalf of (company name): ______________________

Signature: ______________________ Date ______________________