



E.A.E.S.

**European Association for Endoscopic Surgery
and other interventional techniques**

P.V.S.

Polish Videosurgery Society

Are offering a combined membership E.A.E.S / P.V.S.

Subscription Fees:

- 2009 Annual fee of **PLN 230** for Physicians and **PLN 180** for Residents in training
- Discounted rate for a three years membership subscription 2009/2010/2011: **PLN 200/ yr** for Physicians and **PLN 150/yr** for Residents in training.

www.eaes-eur.org

www.wideochirurgia.pl

EAES membership includes:

- Membership Certificate
- Subscription to the EAES official journal
Surgical Endoscopy
- Electronic access to the journals:
 - Surgical Endoscopy
 - Diseases of the Colon & Rectum
 - Annals of Surgical Oncology
 - World Journal of Surgery
- The possibility to sign up for SpringerAlert, an innovative, free-of-charge service that notifies users via e-mail whenever new articles become electronically available, and automatically sends the table of contents and direct links to the abstracts
- EAES newsletter EUROLINK
- EAES yearbook
- Reduced fee annual EAES congress, and World Congresses
- Reduced fees at EAES accredited endoscopic surgery meetings, symposia and workshops when applicable
- Reduced fees at EAES endoscopic surgery Training Courses

PVS membership includes:

- Membership Certificate
- Subscription to the PVS official journal
Videosurgery and other miniinvasive technique
- Electronic access to the journals:
 - Videosurgery and other miniinvasive techniques - on the web page:
www.videosurgeryjournal.com
 - Kardiologia Polska
 - Kardiochirurgia i Torakochirurgia Polska
 - Ginekologia Praktyczna
 - Współczesna Onkologia
 - Archives of Medical Science
- Termedia Newsletter

REGISTRATION FORM (fill in printed letters please)

Name: _____ **First name:** _____

Address: _____

Zip code: _____ **City:** _____ **Country:** _____

Phone: _____ **Fax:** _____

Email: _____

* **Physician** * **Resident in training**.....(signature of
Chief of Department)

Membership option: * **one year (physician PLN 230 or 180 resident)**

* **three years (total: PLN 600 physician or 450 resident)**

* mark proper field

Commitment

To obtain discounted rate for a three years membership subscription to EAES/PVS for 2009/2010/2011, I sign my financial obligation to pay my **annual fee** for the next year: PLNtill the end of last year during three consecutive years. I accept that in case of cessation of my signed commitment I will be expelled out from EAES/PVS organization.

I authorize also the EAES and PVS to obtain information from any source regarding this application and my qualification for membership, which information will be kept confidential by both Societies.

Date and signature.....

Please return the filled and signed the REGISTRATION FORM by fax or by post to:

Klinika Chirurgii Ogólnej, Transplantacyjnej i Wątroby,
ul. Banacha1A, PL 02-097 Warszawa, Sekcja Wideochirurgii TCHP,

fax: +48 (22) 599 1545

Bank PKO BP, Oddział 76 w Warszawie, konto: 72 1020 1097 0000 7802 0115 4640

