



**11<sup>th</sup> Masterclass in Oncology Pharmacy**  
Lisbon/ Portugal, 22 - 26 May 2017



## **Invitation to the 11<sup>th</sup> Masterclass in Oncology Pharmacy**

22 - 26 May 2017, Lisbon, Portugal

The **European Society of Oncology Pharmacy (ESOP)** in cooperation with the **Associação Portuguesa de Farmacêuticos Hospitalares (APFH)** offers the **11<sup>th</sup> Masterclass in Oncology Pharmacy**. The event will be held in Lisbon/ Portugal from 22<sup>nd</sup> to 26<sup>th</sup> May 2017.

The Masterclass offers fundamental and advanced knowledge to pharmacists working in the field of oncology, both for their pharmacy preparatory work and for providing adequate care and support to cancer patients.

**The detailed program of the Masterclass will be available soon on the ESOP website (<https://esopmasterclass.org/>).**

### **Official language**

The official language of the meeting is English.

### **Number of participants**

The maximum number of participants is 40. Registrations will be handled on a “first come, first served” basis, therefore please make sure you register as early as possible.

### **Certificate of attendance**

Participants will be awarded with a certificate of attendance, following appropriate evaluation of the knowledge acquired during the Course they attend.



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## Registration

The ESOP-Masterclass is divided into 2 courses. For more details please check the program.

			<b>Early Rate Deadline: 24<sup>th</sup> February 2017</b>	<b>Regular Rate</b>
<input type="checkbox"/>	<b>Course I</b>	22 <sup>nd</sup> –24 <sup>th</sup> May 2017	390 EUR ESOP members* 480 EUR ESOP Non-members*	530 EUR ESOP members* 650 EUR ESOP Non-members*
<input type="checkbox"/>	<b>Course II</b>	24 <sup>th</sup> –26 <sup>th</sup> May 2017	390 EUR ESOP members* 480 EUR ESOP Non-members*	530 EUR ESOP members* 650 EUR ESOP Non-members*
<input type="checkbox"/>	<b>Both</b>	22 <sup>nd</sup> –26 <sup>th</sup> May 2017	600 EUR ESOP members* 790 EUR ESOP Non-members*	780 EUR ESOP members* 900 EUR ESOP Non-members*

\* incl. VAT

Travel and accommodation expenses shall be covered by participants. Application is only possible with concurrent payment of the registration fee.

Registration applications should be directed to ESOP Membershipservice:

**Fax: 0049 - 40 - 466 500 100 or email: [memberships@esop.li](mailto:memberships@esop.li)**

**DEAD-LINE FOR REGULAR RATE REGISTRATION: Friday, 28<sup>th</sup> April 2017**

Payment Details: MC 2017 / Name and Surname of Participant for whom payment is made

Please note that any bank charges shall be covered by participants.

## Accommodation

Rooms have been pre-booked at the following hotels below, from Sunday, May 21<sup>st</sup> to Friday, May 26<sup>th</sup> 2017, at special rates for Master Class participants:

### **Hotel Vip Executive Art's (event venue) \*\*\*\***

Standard Single Room € 110.40 / Standard Double Room € 119.60

Breakfast Buffet included / Local City Tax of €1,00 per pax/night to be paid directly by each guest at check-out.

All other taxes included.

### **Hotel IBIS Parque das Nações \*\*\* (walking distance)**

Standard Single Room € 101.90 / Standard Double Room € 108.80

Breakfast Buffet included / Local City Tax of €1,00 per pax/night to be paid directly by each guest at check-out.

All other taxes included.



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**Hotel TRYP Lisboa Oriente \*\*\*\* (walking distance)**

Standard Single Room € 125.10 / Standard Double Room € 135.00

Breakfast Buffet included / Local City Tax of €1,00 per pax/night to be paid directly by each guest at check-out.

All other taxes included.

**Hotel TIVOLI Oriente \*\*\*\* (walking distance)**

Standard Single Room € 136.80 / Standard Double Room € 145.80

Breakfast Buffet included / Local City Tax of €1,00 per pax/night to be paid directly by each guest at check-out.

All other taxes included.

**Notes:**

All reservations are confirmed on a “first come/first serve basis”.

All confirmed accommodation should be paid in advance to Sirius Travel Lufthansa City Center.

Requests should be sent to the following email address or via fax specifying the code “MASTERCLASS”.

Email: Mariana Cardoso

[mariana@sirius.pt](mailto:mariana@sirius.pt)

Phone number: 00351 915137621

Fax number: 00351 226075557

**DEADLINE FOR HOTEL RESERVATIONS: Friday, April 21<sup>st</sup> 2017**

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Please note that in the case of booking after the deadlines, the accommodation in the hotels cannot be guaranteed, and will be confirmed subject to availability.

Please note that accommodation expenses shall be covered by participants on an individual basis.

**Travel Arrangements**

Please note that all travel arrangements shall be made and covered by participants themselves. The registration fee does not include travel expenses.

**We look forward for your registration!**



## REGISTRATION FORM

### 1. PERSONAL DETAILS

Title \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Organisation \_\_\_\_\_

Position \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

### 2. REGISTRATION

Please tick the appropriate box to indicate your registration type:

- ESOP Member  
 ESOP Non-Member

Also, please indicate the course you wish to register for:

			<b>Early Rate Deadline: 24<sup>th</sup> February 2017</b>	<b>Regular Rate</b>
<input type="checkbox"/>	<b>Course I</b>	22 <sup>nd</sup> –24 <sup>th</sup> May 2017	390 EUR ESOP members* 480 EUR ESOP Non-members*	530 EUR ESOP members* 650 EUR ESOP Non-members*
<input type="checkbox"/>	<b>Course II</b>	24 <sup>th</sup> –26 <sup>th</sup> May 2017	390 EUR ESOP members* 480 EUR ESOP Non-members*	530 EUR ESOP members* 650 EUR ESOP Non-members*
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\* incl. VAT

**DEAD-LINE FOR REGISTRATION: Friday, 28<sup>th</sup> April 2017**



## REGISTRATION FORM

### 3. PAYMENT DETAILS

Please fill in the following remittance advice to indicate payment of your registration fee:

Billing to:

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Amount

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- **Please note that payments should be made to:**

**Bank transfer to the ESOP bank account:**

ESOP, 9, rue Edward Steichen, L- 2540 LUXEMBOURG:

BGL BNP Paribas, 10, rue E. Steichen, L-2951 LUXEMBOURG

BIC: **BGLLLULL**BIC: **DAAEDED**, IBAN: **LU33 0030 3596 5023 3000**

Payment Details: ESOP /Invoice Number/ Name and Surname of Participant for whom payment is made

- **Bank charges are fully covered by participants**

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Date

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Signature

**Please sign and return the completed registration form to (fax, email):**

- ESOP Membershipservice  
c/o DGOP e.V.  
Veritaskai 6  
21079 Hamburg  
Germany
- fax: **0049 - 40 – 466 500 100**
- **membershipservic@esop.li**