Attendance Application Form

Surname	First	Title (Dr/Prof etc)
Tel no	Email	
Address		
Town	CountyP	ostcode
Special Dietary requirements:		

This is the first time I have attended a PCR Conference......Yes/No

Please ensure that you complete your workshop choices form on the attached page

PAYMENT

Registration Fee	£275.00	£
Members Fee - payable if not currently member of PCR (Trainees/Registrars Free)	£ 100.00	£
Registrar/Trainee Discount	-£100.00	£
<u>Thursday evening Buffet</u> Included in delegate fee (non-delegate places available £35 pp)	Yes/	′No
Friday Evening – Conference Dinner	£50.00	£
Saturday – Optional packed Lunch on departure		£
Total amount due		£

<u>Cheque</u> - £..... made payable to PCR Society (preferred method of payment)

or • <u>Credit Card</u> - £..... by Mastercard/Visa (please delete as appropriate)

Card no:

CSC _____ (3 digits from back of card) Signature.....

Once completed please return both pages of this form to: Helen Livesley, PCR Society, PO Box 42, Northallerton, N Yorkshire DL7 8YG

IMPORTANT - Please complete workshop choices overleaf/

Name:

Workshops - Please number each section 1- 12 (1 = first choice)

Workshop Sessions	
Physical Activity	
Joint Injection Session – Upper Limb	
Joint Injection Session –Lower Limb	
Ultrasound workshop	
Groin Session	
Case discussion including 'New clinical tests in MSK practice'	
 Gout - how to apply the new EULAR and BSR Gout guidelines to general practice. 	
 Inflammatory arthritis – update on latest guidelines and approaches to management. 	
Update on PMR and TA	
Chronic Pain	
10min GP LBP/sciatica consultation	

Accommodation:

The conference is to be held at the Park Inn Hotel, York, which we have used in the past.

http://www.parkinn.co.uk/hotel-york

Accommodation can be booked at a discounted rate directly with Conference York via the following:

Web Link: https://aws.passkey.com/go/PCRSociety2017

Tel: +44 (0) 1904 554653

Fax: +44 (0) 1904 554460

Email: delegates@visityork.org