THE 46TH UNION WORLD CONFERENCE ON LUNG HEALTH
CAPE TOWN, SOUTH AFRICA, 2–6 DECEMBER 2015

A NEW AGENDA
LUNG HEALTH BEYOND 2015

To be returned to The Union, 68 Boulevard Saint-Michel, 75006 Paris, France
Fax: (+33) 1 43 29 90 87 – e-mail: registration@theunion.org

❏ Prof.   ❏ Dr   ❏ Mr   ❏ Mrs   ❏ Ms

Family Name: .... First Name:…………………………………………………………………

Organisation:……..

Address:……..

Postal code:………………………………………. City:…………………………………………… Country:……………………………………..

Tel:………………………………………....... .. . Cell:…………………………………………… . Fax:…………………………………………..

E-mail (required): ……

SECTION A: REGISTRATION FEES

*Registration forms received after 12 November 2015 will be processed on site. Online registration will remain open until 1 December 2015.

Category	Until 1 September	2 September –11 November*	On site		
Union member	550 €	600 €	650 €		
Non-Union member	600 €	650 €	700 €		
Student *(in training and under 35 years old)* / Nurse	250 €	300 €	350 €		
South African delegate	200 €	225 €	250 €		
South African student / nurse	150 €	175 €	200 €		
One-day registration	200 €	225 €	250 €		
Please indicate chosen day(s) (2 days maximum)	❏ 2 December	❏ 3 December	❏ 4 December	❏ 5 December	❏ 6 December
Accompanying person(s)	100 €	125 €	150 €		

1. Family name: ………………………………………………………… First name: ………………………………………………………..
   E-mail: ……

2. Family name: ………………………………………………………… First name:……………………………………………........................
   E-mail: ……

Accompanying persons are entitled to attend the welcome reception on Thursday,3 December , and will be given access to the Exhibition areas. Accompanying persons are not permitted to attend the scientific sessions.

SECTION B: WORKSHOPS AND POST-GRADUATE COURSES

Post-graduate courses and workshops take place on Wednesday 2 and Thursday 3 December.
You can attend one post-graduate course or workshop on each day. Fee for 1 course is 100€. Workshops are free of charge for delegates of the World Conference. However you have to register for the workshop(s) you wish to attend as the number of seats is limited. If you are not registered for the conference and want to attend a workshop the fee is 100€ (200€ for 2 workshops)

POST-GRADUATE COURSES (100€per course)	
Wednesday, 2 December 2015	**Thursday, 3 December 2015**
❏ ***Course n°1:*** *Project Management (full day)*	❏ ***Course n°6:*** *Implementing new and re-purposed drugs for the treatment of drug-resistant TB: lessons from the field (full day)*
❏ ***Course n°2:*** *Best practices in the management of the second-line injectable drugs in children with multidrug-resistant TB (full day)*	❏ ***Course n°7:*** *Update on clinical and programmatic management of MDR-TB and XDR-TB (full day)*
❏ ~~***Course n°3:*** *Qualitative methods in Global Tuberculosis Research (full day)*~~ **FULL**	❏ ***Course n°8:*** *Integrating palliative care into the continuum of MDR-TB care (half day)*
❏ ~~***Course n°4:*** *An introduction to tuberculosis modelling (TB Modelling and Analysis Consortium) (full day)*~~ **FULL**	❏ ***Course n°9:*** *Establishing community MDR-TB programmes (half day)*
❏ ~~***Course n°5:*** *Skill Building for health educators (full day)*~~ **CANCELLED**	❏ ***Course n°10:*** *Making sense and use of routine TB data for management (full day)*
	❏ ~~***Course n°11:*** *Risk factor management and tuberculosis control (full day)*~~ **CANCELLED**
	❏ ***Course n°12:*** *Key components of effective and sustainable tuberculosis infection control programme (full day)*
	❏ ***Course n°13:*** *Strengthening TB case finding and prevention in high-risk populations (full day)*

WORKSHOPS (free of charge for registered delegates)	
Wednesday, 2 December 2015	**Thursday, 3 December 2015**
❏ *Workshop n°1:* Operational research skills in one day(full day)	❏ *Workshop n°6:* Ensuring MDR-TB patient information and adherence counselling is a key part of patient-centered care (full day)
❏ *Workshop n°2:* Building new treatment paradigms for TB programmes using PK/PD science (full day)	❏ *Workshop n°7:* The Global Fund's New Funding Model: country experiences of moving toward grant implementation (full day)
❏ *Workshop n°3:* Developing counselling skill for TB care-givers in one day (full day)	❏ *Workshop n°8:* WHO consolidated guidelines for treatment of tuberculosis (full day)
❏ *Workshop n°4:* Adding connectivity to your TB diagnostics (half day)	❏ *Workshop n°9: CANCELLED*
❏ *Workshop n°5:* Challenges in setting up phase 2/3 MDR-TB clinical trials (half day)	❏ *Workshop n°10:* Application of programme guidelines for community-driven projects to eliminate TB among migrants (half day)
	❏ *Workshop n°11: Towards a community and patient-centered movement (half day)* **FULL**
	❏ *Workshop n°12: Monitoring & evaluation in active case finding - The STOP TB TBREACH approach (half day)* **FULL**
	❏ *Workshop n°13: Challenges of DR TB treatment in India and opportunities beyond 2015: patient voices from India (half day)* **CANCELLED**
	❏ *Workshop n°14:* Access to TB medicines beyond 2015: the dynamics of demand and supply (full day)
	❏ *Workshop n°15: Molecular diagnostics – bringing together the basic science and clinical worlds (full day)* **FULL**
	❏ *Workshop n°16:* Pharmacovigilance for bedaquiline, delamanid and other TB drugs and regimens (full day)
	❏ *Workshop n°17: CANCELLED*

SECTION C: 4th PRESIDENT'S CENTENNIAL DINNER

❏ Please tick the box if you would like to attend the 4th President's Centennial Dinner on Wednesday, 2 December 2015 and select your category

❏ 200 € (Contributor)   ❏ 500 € (Supporter)   ❏ 1 000 € (Sponsor)   ❏ 2 500 € (Benefactor)   ❏ 5 000 € (President's circle)

❏ Other (minimum is 200 €):………………….......……………………….....€

Names of the participants: ………………………......…………………..….………………......……………………….…………….……….

Emails of the participants: …………………….......…………………..….………………......………………...………………….……….……….

Please choose the meal (fish, meat or vegetarian) for each participant:……………….......……………..….………………......…………………….……….

TOTAL TO BE PAID

Registration fees ………….………….€ + Course or workshop ……………….…...€ + Dinner……………….…….€ =……………….…..……………….……€

SECTION D: PAYMENT

❏ I agree with the payment and cancellation conditions set out on the conference website capetown.worldlunghealth.org

❏ **Bank cheque** in euros only, to the order of "The Union"	❏ **Bank transfer** to "Union Conference" **(please include a copy of the bank order with your registration form)**
❏ **International Credit Card** (Visa, MasterCard, Amex)	Bank fees have to be borne by the sender.
I authorise The Union to debit my card with the amount of ………… euros	Account holder: UICTMR (The Union) Bank name: BNP PARIBAS
Card number:	Bank address : Paris Associations, 8 rue Sainte Cécile, 75009 Paris, France
|…|…|…|…|…|…|…|…|…|…|…|…|…|…|…|	Bank code : 30004 Code branch : 00969
3-digit cryptogram (back of card) |…|…|…|	Account n°: 00010070621 Banking identification: 20
Expiry date: ………./…. …… (month / year)	IBAN: FR76 3000 4009 6900 0100 7062 120 BIC: BNPAFRPPPAA

Date:………………/……….……………/ 2015

Signature (mandatory):