



## ENSEIGNEMENT POST UNIVERSITAIRE

### GENERAL CONDITIONS OF REGISTRATION

“EPUs” are exclusively reserved for graduate doctors (with C.E.S. or D.E.S. of Pathology diploma) except for exceptions mentioned in each “EPU” Program.

Half-price applies to young “AHU”s stationed in France (less than 2 years practice).

Registrations are recorded after receipt of payment (check or transfer, see References at the bottom of the page) and the “REGISTRATION FORM” (page 3); no registration is possible by email or phone.

It is imperative to check before on the SFP site whether places are still vacant for the desired “EPU”.

Each registration request is validated in the order of receipt of requests if accompanied by payment (if places available). A registration validation is sent by email upon receipt of payment.

Any defecation before the “EPU” date must be declared by email:

- A reassignment of payment for a subsequent EPU is proposed as a priority;
- Otherwise, a deduction price of 25% may be applied.

In case of non-attendance without justification:

- 100% of the price will be cashed.

**INFORMATION:** At the end of the course session, the organizer will provide attendance and payment certificate. No other copy will be provided by SFP secretariat.

#### Bank references for transfer:

**Société Générale** Agence Le Kremlin Bicêtre (03352)  
**Banque** 30003 **Agence** 03352 **Compte** N° 00037263957 **Clé** 59  
**BIC** SOGEFRPPIBAN FR76 3000 3033 5200 0372 6395 759

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## REGISTRATION DETAILS

- Consult the desired “EPU” Program on SFP site (dates, content, prices, etc.) and check that it is not mentioned as "FULL".
- Fill in the "**REGISTRATION FORM**" (page 3).
- Send the completed **form + payment** (price indicated on Program) to the SFP (address indicated at the bottom of the form), by CHECK (payable to "SFP") or by bank TRANSFER (References at the bottom of page).

**Each registration is validated in order of receipt if accompanied by PAYMENT (CHECK or bank TRANSFER - effective on the date of receipt of the Bulletin).**

**A registration validation is sent by email upon receipt of this deposit.**

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## FOR FINANCIAL ASSISTANCE BY INSTITUTION OR HEALTH ESTABLISHMENTS

- Submit an **AGREEMENT FORM** (“*Convention*”) to your Institution or Health Establishment which takes in charge the EPU’s payment: download the doc "*Convention*" from the SFP site.

This form must be duly signed and completed by the administrator with ist name and function, then send to SFP by @ sopathol@gmail.com to validate definitively your registration.

- EPU’s payment must be by CHECK and send to SFP with the completed FORM to validate definitively registration. (= "Deposit Check" that will be returned),

If the **AGREEMENT FORM is not duly completed**, the deposit check will be cashed by SFP (with invoice sent by email).

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- The SFP does not provide compensation for non-attendance expenses.**

- At the end of the EPU, the SFP sends an "**Attendance Certificate**" by email to the participant and to the HE. Deposit check will be returned to the participant as soon as payment will be receipt from the HE.

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**REGISTRATION FORM**

TITLE OF "EPU": .....

EPU DATE: .....

EPU PRICE: ..... €                      Payment:    CHECK       /       TRANSFER

Last Name: .....

First Name: .....

SFP Member (Updated Annual Contribution):            YES    /    NO

E-MAIL ADDRESS: .....

TELEPHONE(S): ..... FAX: .....

Professional or Personal Address:

.....

FUNDING by Institution or Health Establishment (HE):    YES    /    NO

IF YES, indicate the HE name (AGREEMENT "*Convention*" must be filled up and signed):

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**SEND IT WITH PAYMENT TO:**

Secrétariat de la SFP  
Hôpital Bicêtre - Service d'Anatomie et Cytologie Pathologiques  
78 rue du Général Leclerc 94275 Le Kremlin Bicêtre - FRANCE  
Tél. : +33 (0)1 45 21 78 72 - E-mail : [sfpathol@gmail.com](mailto:sfpathol@gmail.com)

**Bank references for transfer:**

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