



**20<sup>th</sup> International Training Course on  
Invasive Bladder Cancer & Urinary  
Diversion Techniques  
From A-Z  
From 28-31 March, 2026**



**Registration Form**

**Professional title:** .....

**Name:** .....

**Country:** .....

**Email** .....

**Fax:** .....

**Tel. (WhatsApp contact is preferable):** .....

**Registration fee:** 1300 \$ (Non-Egyptians) ☐

7000 L.E (Egyptian in house) ☐

**Hotel Reservation: ON YOUR OWN**

<b>Room:</b>	<b>Single</b>	<b>1296 L.E /Night</b>	<input type="checkbox"/>	<b>54 \$ /Night</b>	<input type="checkbox"/>
	<b>Double</b>	<b>1596 L.E /Night</b>	<input type="checkbox"/>	<b>64 \$ /Night</b>	<input type="checkbox"/>
	<b>Double (Nile View)</b>	<b>1996 L.E /Night</b>	<input type="checkbox"/>	<b>74 \$ /Night</b>	<input type="checkbox"/>

**Date of arrival** : / /

**Date of departure** : / /

**Method of payment:**

- **Bank Transfer:** ☐

Mansoura urology and nephrology center - Egypt.

Bank Identifier Code: CIBEEGCX015.

Bank name: Commercial International Bank Egypt SA.

The beneficiary IBAN / Account number:

IBAN: EG720010001500000100007997878 for US\$

IBAN: EG720010001500000100005624686 for EGP

- **Cash payment on site:** ☐

**Please fill in this form and send it back by fax or by email.**

**Mailing Address:**

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