REGISTRATION FORM

11th Interdisciplinary Endoscopic Skull Base Surgery Course

September 22- September 24, 2022

University Hospital Essen

COMPLETE IN BLOCK CAPITALS AND FAX OR EMAIL TO: email: fortbildung.hno@uk-essen.de
Fax: +49 201 723 9472166

Family Name		_	
First Name			
Specialty			
	Clinic addre	ess /work address	
<u>Hospital</u>		_	
Zip Code / City	y / Country		
Street			
<u>Email</u>			
<u>Phone</u>			
<u>Fax</u>			
Full co	ourse fee: 1200 Euro		
Reside	ent course fee: 800 Euro		
PLEASE ISSUE	THE INVOICE TO (to be filled in	n case of different address from the one above indicate	ed)
Please transfe following bank		ee 1200 €, resident course fee 800 € to the	
Universitätskl	inikum Essen		
IBAN: DE8236	0501050004900700		
Reference: 10	6-13970		
<u>Place, Date</u>		Signature	

Your registration will be confirmed after payment.

Cancellation policy: Refunding only possible until 30 days prior to the course.