

Course Registration Form

Orthognathic Surgery Vienna April 2008

April 10-12, 2008

Gesellschaft der Aerzte "Billrothhaus"

1090 Vienna, Frankgasse 8, Austria

Course Registration for:

Course fee:

[] Orthognathic Surgery Vienna, April 10-12, 2008

EUR 410.-

Course fee includes coffee breaks, lunches and the course dinner. Your registration will be valid after receipt of payment. Hotel costs have to be paid separately and are not included in the course fee.

Payment

Bank transfer

Address of Bank: Bank Austria/Creditanstalt, Rainerstrasse 2, 5020 Salzburg, Austria

Account No.: 0095-7044100, Sort code 12000

Name of Account: Synthes Österreich GmbH

Purpose: Orthognathic Surgery Vienna April 2008

BIC-Address: BKAUATWW, IBAN: AT34 1100 0009 5704 4100

Bank charges must be paid by the participant

Please pay in Euro before March 31st, 2008 and state your name on every remittance slip

Payment of registration by credit card is not accepted!

Personal Data

Please fill in form using block letters only. Your name will be printed on the certificate

Name

First name

Address

Zip code City

City

Country

Phone

Fax

e-mail

Date

Signature

For hotel accommodation please contact hotels directly!

Please return registration until March 31st, 2008 to:

Synthes Österreich GmbH

Mag. (FH) Sylvia Reischl

A-5017 Salzburg, Karolingerstrasse 16

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