

Registration Form



AOCMF Course „Operative Techniques in Oral and Maxillofacial Surgery – Hands-On Cadaver“

April 26th–28th, 2010

Vienna, Austria

Personal Data

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

Last Name		Title
First Name		
Clinic / Hospital		Department
Address		
Zip Code	City	Country

Please fill in if you wish to receive the confirmation of your registration sent to your private address:

Private Address		
Zip Code	City	Country
Phone	Fax	
e-Mail		
Date	Signature	

Course Fee

Payment before April 1st, 2010 Euro 950,-

Payment after April 1st, 2010 Euro 990,-

Covers admission, coffee breaks, lunch and the course dinner on Tuesday , April 27th, 2010.

Your registration will be valid after receipt of payment.

Deadline for registration: April 1st, 2010

Hotel costs have to be paid separately and are not included in the course fee.

For hotel reservation please contact hotels directly (see page 14 / Program).

Payment

Name of Account: „AO Kurssekretariat“

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

Sort Code: 12000

Account No.: 00951616200

IBAN: AT34 1100 0009 5161 6200

Swift: BKAUATWW

Bank charges must be paid by the participant.

Please pay in Euro before April 15th, 2010 and state your name on every remittance slip.

After receipt of payment you will receive a confirmation of your registration.

Payment of registration by credit card will not be accepted!

Please return registration until April 1st, 2010 to:

AO Course Secretariat
Mag. (FH) Sylvia Reischl
A-5020 Salzburg, Karolingerstr. 16
Phone +43 662 828525
Fax +43 662 828525-28
e-Mail ao-sekretariat@sbg.at