ATTENDANCE REGISTRATION FORM

Please fill in and send back before 1 May 2014, to Prof. Katrien Lagrou, KU Leuven, Tel: +32 16 34 70 98
e-mail: katrien.lagrou@uzleuven.be - post: UZ/KU Leuven campus Gasthuisberg, Herestraat 49, 3000 Leuven

Specialization Course in Medical Mycology
from Monday, September 15, 2014 until Thursday, September 19, 2014
at the KU Leuven Campus Gasthuisberg,
Herestraat 49, 3000 Leuven,
ON2, Vesalius I

REGISTRATION IS REQUIRED – thank you for sending us back this form

| First name |  |
| Last name |  |
| Institution |  |
| Department |  |
| Postal address |  |
| Post code + city |  |
| E-mail address |  |

REGISTRATION FEE

Payment (1,000 €) is to be made by bank transfer to KBC account number BE60 7340 0666 0370
with reference: 400/0008/19788.
Registration is only valid after payment.

For more informations on the course:
Dr. Ignace Surmont : Ignace.Surmont@azsintjian.be
Prof. Katrien Lagrou : katrien.lagrou@uzleuven.be
Prof. Marie-Pierre Hayette : mphayette@ulg.ac.be