



[Typ hier]

ATTENDANCE REGISTRATION FORM

Please fill in and send back before 1 May 2016, to Prof. Katrien Lagrou, KU Leuven, Tel: +32 16 34 70 98
email: katrien.lagrou@uzleuven.be - post: UZ/KU Leuven campus Gasthuisberg, Herestraat 49, 3000 Leuven

Specialization Course in Medical Mycology

from Monday, September 5, 2016
until Friday, September 9, 2016

at the KU Leuven Campus Gasthuisberg,
Herestraat 49, 3000 Leuven,
ON2, Vesalius 2

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	

"I hereby acknowledge that I have read and understood the terms and conditions as provided in the 'KU Leuven Continuing Education - General terms and conditions for registration', available [here](#) and I agree to all of the terms."

REGISTRATION FEE

Payment fee: 1.000 €

Do you prefer payment by invoice or by bank transfer ? Please indicate below.

Invoice	<input type="checkbox"/>
Bank transfer to KBC account number <u>BE60 7340 0666 0370</u> with reference: <u>400/0008/19788</u>	<input type="checkbox"/>

Registration is only valid after payment.

For more informations on the course:

Dr. Ignace Surmont : Ignace.Surmont@azsintjan.be

Prof. Katrien Lagrou : katrien.lagrou@uzleuven.be