

REGISTRATION FORM

Advanced European Course on Hand Surgery 26-28 October, 2006 – Hotel Tulip Inn Budapest Millennium – Budapest

Complete with block letters and return to the Secretariat:

ASSZISZTENCIA Congress Bureau – Hegedűs Gyula u. 20. H-1136 Budapest, Hungary – Fax:+36 1 350 0929

Web: www.asszisztencia.hu E-mail: hand@asszisztencia.hu

PARTICIPANT

Family name.....
First name Title
Institute
City Country..... ZIP Code.....
Street
Phone Fax..... E-mail

BILLING ADDRESS

Customer name
Contact name.....
City Country..... ZIP Code.....
Street
Phone Fax..... E-mail

REGISTRATION FEE

Registration fee..... 200 EURO/person

HOTEL RESERVATION

| | single room / night | double room / night |
|---|----------------------------------|----------------------------------|
| Hotel Tulip Inn Budapest Millennium | <input type="checkbox"/> 76 EURO | <input type="checkbox"/> 92 EURO |

Arrival: October Total number of nights.....
Departure: October
Room shared with:.....

TÁRSASÁGI PROGRAMOK

Banquet Dinner (27 October, 2006) 48 EURO for person
 Credit Card Authorization Form attached
 Copy of a bank draft attached

Date

Signature

Fizetve: