

Registration

Please fill in and send back the requested information if you wish to attend the meeting

Registration Form

- I will take part in the morning session from 08:30 - 12:30
- I will take part in the afternoon session from 14:00 - 17:00
- I will take part in both sessions

Professional Title:

Last Name, First Name:

Street, N°, Postcode, City, Country:

E-mail:

Date, Signature:

Please email your reply to karin@eadv.org by 5 October 2017

Free admittance previous registration



Availability:
Places will be allocated on a first-come, first-served basis.

Course language:
English, Italian.
No simultaneous translation is provided

Light lunch included