

Application form

Paediatric Stroke Days, 8th and 9th of June 2018 2nd European Paediatric Stroke Conference

Name :	
First Name:	
Titel:	
Address/Place:	
Hospital:	
e-mail :	

I register for the following events

- 2nd European Paediatric Stroke Conference, Friday
 - early bird till 27th of May 100 Euro/100 CHF _____
 - late registration and cash at meeting 120 Euro/120 CHF _____

- Dinner on 08th of June 2018 in the Rosengarten 50 Euro/60 CHF _____

Total costs _____

- Research day Saturday
 - with a presentation

Title: _____

Short description of topic: _____

Date: _____

Signature: _____

Bank connections: IBAN CH24 0900 0000 9001 7300 3
Schweizerische Gesellschaft Neuropädiatrie
Comment: 2nd European Paediatric Stroke Conference in Bern

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