18th INTERNATIONAL VICENZA COURSE ON PERITONEAL DIALYSIS

Vicenza, Italy – Ente Fiera
June 23-26, 2009

REGISTRATION FORM

DEADLINE: May 31, 2009

Name _____

Surname _____

Address _____

_____

Affiliation _____

_____

City _____

Country _____

Tel. _____

Fax _____

E-mail _____

Fiscal code _____

Invoice to:

_____

_____

I herewith enclose a copy of Bank Transfer of : **800 € (within May 31st 2009)**

960 € (after May 31st 2009)

REGISTRATION FORMS DULY COMPILED WITHOUT COPY OF BANK TRANSFER

WILL NOT BE ACCEPTED.

The total amount for registration has been payed to:

New Progress Service s.r.l.

CASSA DI RISPARMIO DEL VENETO – Fil. Porta Padova – VI
c/c 00001002066 ABI 06225 CAB 11832 CIN Y
IBAN : IT27 Y062 2511 8320 0000 1002066
BIC IBSPIT2P