

1st Meeting of the European Academy of ORL-HNS
in Collaboration with EUFOS

June 27-30, 2009

Congress Center Rosengarten, Mannheim, Germany



REGISTRATION FORM

(Online registration is highly recommended at www.eaorl-hns2009.com
Instructional Courses can only be booked online)

MONDIAL CONGRESS & EVENTS Operngasse 20b A-1040 Vienna Austria	Tel.: +43 1 58804 – 0 Fax: +43 1 588 04 185 Email: eaorl-hns2009@mondial-congress.com Web: www.eaorl-hns2009.com
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PARTICIPANT INFORMATION		
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Title:	
Last Name:	First Name:	
Organisation:		
Address:		
City:	Postcode:	Country:
Tel:	Fax:	
Email:		

GENERAL INFORMATION	
Following data will only be used by the European Academy of ORL-HNS for further improvement of future meetings. No information will be linked to individuals.	
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male
Age:	<input type="checkbox"/> <35 years <input type="checkbox"/> 36-45 years <input type="checkbox"/> 46-55 years <input type="checkbox"/> 56-65 years <input type="checkbox"/> >65 years
Member of Subspecialty Societies:	
<input type="checkbox"/> EAACI	<input type="checkbox"/> EAFPS <input type="checkbox"/> EASM <input type="checkbox"/> EAONO <input type="checkbox"/> EFAS <input type="checkbox"/> EGDG <input type="checkbox"/> EGFL
<input type="checkbox"/> EHNS	<input type="checkbox"/> ELS <input type="checkbox"/> ERS <input type="checkbox"/> ESBS <input type="checkbox"/> ESGS <input type="checkbox"/> ESPO <input type="checkbox"/> EUFOS
<input type="checkbox"/> PWG	<input type="checkbox"/> UEMS <input type="checkbox"/> UEP
Member of National ENT Society:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Main Field:	<input type="checkbox"/> Otology <input type="checkbox"/> Rhinology <input type="checkbox"/> Laryngology
Professional Setting:	<input type="checkbox"/> Public Hospital or University Clinic only <input type="checkbox"/> Private Practice only <input type="checkbox"/> Public Hospital or University Clinic and Private Practice
Do you conduct research?	<input type="checkbox"/> Yes <input type="checkbox"/> No

CREDIT CARD DETAILS

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