2024 - REGISTRATION FORM

LAPAROSCOPIC GENERAL SURGERY

ENGLISH-SPEAKING COURSE / LIMITED TO 30 PARTICIPANTS

Dr./Prof. Family name .....

First name .....

Mobile phone ..... Email .....

Please specify (category and name): ◯ Hospital ◯ Clinic ◯ Private practice

.....

Professional address .....

.....

Zip code ..... City ..... Country .....

February 26 - March 1

☐ Course registration without hotel accommodation ..... **1,500 USD**

☐ Course registration at one of **IRCAD Africa partner hotels** ..... **1,850 USD**

According to availability: Phoenix Apartment, Lebanon Hotel & Five to Five Hotel *(see page 10)*

5 nights, in a single room, breakfasts, and city tax included

(check-in February 25, check-out March 1)

Payment:

Please bill my credit card: ☐ VISA ☐ MC ☐ AMEX

N° | | | | | | | | | | | | | | | | Expiry Date | | / | | Security code | | | | |

☑ **I accept the cancellation policies** ***(see page 2)***

REGISTRATION FEES INCLUDE

> Theoretical sessions
> Live or pre-recorded operative demonstrations
> **4 half days of hands-on sessions on live tissue**
> Coffee breaks and lunches
> One dinner

NAME & SIGNATURE:

IRCAD Africa is in compliance with Rwanda's data protection law.
Law No 058/2021 of 13/10/2021 relating to the protection of personal data and privacy.