

Registration Form

Personal information	
Name : First name :	
Private Address :	
.....	
Work Address :	
.....	
Year of Surgical Training 2017-2018: Inami/ Riziv nr. :	
University: KUL – UZG – UZA – VUB- ULG – UCL – ULB	
E-mail 1: E-mail 2 :	
Tél. / Gsm :	
Inscription	
Prix	
Course registration fee (to be refunded after the course) (1)	50 €
BGES Annual Subscription (mandatory) (2) (*)	
○ Simple BGES Member (2017)	50€
○ Combined member BGES (2017) + EAES (2018)	100€
(*) Please make a choice	
Total (1)+(2)	
Payment by transfer to the bank account :	
BIC GEBABEBB / IBAN BE33 2100 8485 5046	
Communication: Suturing course 2017 + Name + First Name	
Signature :	
Registration form to be sent to	
BGES - Arlette SIEBERTZ - Lotstraat 67, B-1703 SCHEEPDAAL	
GSM : + 32 (0) 475/382826 – Email: asiebertz@skynet.be	