

SEKTION | BEWEGUNGSSTÖRUNGEN & NEUROMODULATION

APPLICATION FORM

I would like to attend the
International DBS Symposium of the Clinical Research Group KFO 247
in Berlin, Nov 28-29, 2016

□ I have submitted an abstract.

□ I apply for a junior grant (please attach letter of motivation)

Fax: +49 30 450 560 901

Email: abstract-registration@charite.de

Title	
Name	
Surname	
Address	
City, Postal Code	
Tel.	
Email	
Affiliation	
DBS	
experience/motivation	
to participate	
Deadline for abstract submission is 30.10.2016. Early registration recommended due to limited availability.	
Registration fee: 60 €	
Bank transfer to: Charité – Universitaetsmedizin Berlin	
IBAN: DE11 1203 0000 0001 5123 59	

Swift/BIC:BYLADEM1001Reference:IA 200702 & Your Last Name, Your First NamePlease make sure to enter the correct reference number.