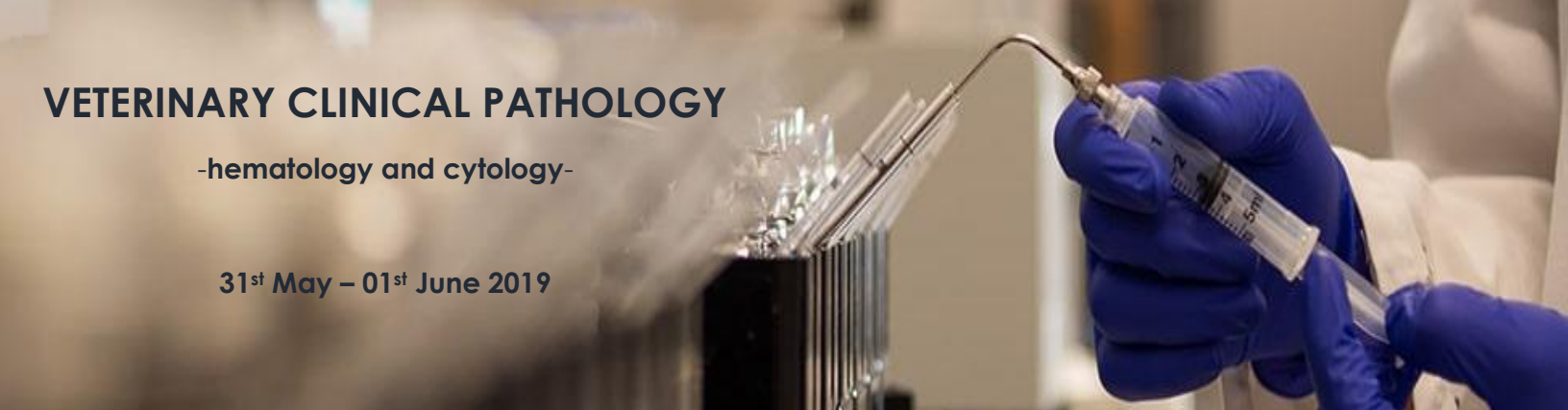


# VETERINARY CLINICAL PATHOLOGY

-hematology and cytology-

31<sup>st</sup> May – 01<sup>st</sup> June 2019



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First name                      Last name                       DVM  VMD    Other \_\_\_\_\_

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Email address (please provide your email address in order to receive course info and updates)

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Full name and address of a person/organization making payment

\_\_\_\_\_

Phone

\_\_\_\_\_

Country

Vegetarian     Yes     No

\_\_\_\_\_

Any other request/condition we should know about

**Payment of fees:** The course tuition fee includes your place in the course, meals, course notes and transportation. Please note that your accommodation is not included in the tuition fee.

**Cancellation:** There will be no refunds in the case of a cancellation received less than 6 weeks prior to the course start, a no-show situation or a cancellation during the course. Cancellations made 6 weeks before the course starts will be charged 50eur (administrative charge). Tuition fees will be fully reimbursed if the course is cancelled by OKEAN.

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\_\_\_\_\_

Date/location

\_\_\_\_\_

Participant signature

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