




INTERNATIONAL MEETING ON FAMILIAL LIPODYSTROPHIES

Santiago de Compostela, 3-4th April 2009

REGISTRATION FORM

	
NAME: SURNAME: INSTITUTION: ADDRESS: COUNTRY: PHONE: E-MAIL:	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
	REGISTRATION FEE: 30,00 €
ACCOUNT NO.	0128/0110/23/0100030201
IBAN CODE	ES2101280110230100030201
SWIFT/BIC	BKBKESMM

E-MAIL: lipodistrofias@gmail.com