**7th International Symposium of the IZKF Erlangen “Translational Medicine” Kloster Banz, Bad Staffelstein, Germany, June 27th – 28th, 2019**

Universitätsklinikum Erlangen **Please reply until 15th March 2019**

IZKF-Geschäftsstelle

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**Email:** izkf-administration@uk-erlangen.de

|  |  |
| --- | --- |
| Name (Title/ first name/ name) |  |
| Institution  |  |
| Department/ Institute/ Clinic |  |
| E-Mail/ phone number |  |

Poster presentation: [ ]  yes [ ]  no

|  |
| --- |
| Title or working title of poster presentation (if applicable): |
|  |

I will participate on: [ ]  27.06.2019 [ ]  28.06.2019

**The participation fee (scientific programme and the catering on site)
is 80 € per participant.**

Please indicate the correct billing address:

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**For information on accommodation, please contact:****izkf-administration@uk-erlangen.de**

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 Place, date Signature