

## **REGISTRATION – COMMENTS Form**

If you are interested in Upper Limb Committee activities, please send us the registration form with the necessary information to the ESSKA Executive Office, Fondation Norbert METZ, 76, rue d'Eich, L-1460 Luxembourg or per email to [dolenc.brigitte@chl.lu](mailto:dolenc.brigitte@chl.lu) / [tzanakakisnik@yahoo.gr](mailto:tzanakakisnik@yahoo.gr)

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Status (position): \_\_\_\_\_

Actual Institute: \_\_\_\_\_

Personal Address: \_\_\_\_\_

Street: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### **COMMENTS**

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Date: \_\_\_\_\_

Signature: \_\_\_\_\_