

Registration for the workshop *imagINe surgery* | 11-12 January 2019 | Berlin



To register **bindingly**, please fill in the required information - all fields obligatory - and email it to bwg.imainesurgery@hu-berlin.de. You will receive a confirmation notification for successful registration.

Please note: as a registered participant, in case you are unable to attend the workshop please inform us **as soon as possible**. The places are limited and will be allocated to someone on the waiting list.

Thank you.

Last Name

Name

Institution | Company

City

Country

eMail

Short Bio