

REGISTRATION FORM

COURSE – ASSISTING HAND ASSESSMENT

NAME AND SURNAME: _____

ID: _____

ADDRESS: _____

POST CODE: _____ PHONE NUMBER: _____

EMAIL: _____

REGISTRATION: Registration is compulsory. Registration will be accepted in order of arrival and until all available seats. Please send your agreement by using:

1.The registration form sent by mail. info@fundaciondacer.org Subject: AHA

2.The bank receipt.

PAYMENT PROCEDURE: Fee € 600,00 (Before Sep20th. 650 after that date) *AHA kit not included in the fee.*

The participation fee will be paid by bank transfer to the attention of:

Fundación DACER

Banco Caminos:

IBAN/ES09–0234–0001–03–9026865003

IMPORTANT: In Observations, write: AHA & YOUR NAME .

CANCELATION: Written justification needed. For a 90% devolution the cancelation must be done 30 days before the beginning of the course. After this, no devolution is provided.

*Course direction: Dr Vanesa Abuín. PT, MSc, PhD. Adjunct Lecturer Universidad Europea de Madrid.
Member of the Musculoskeletal Pain & Motor Control Research Group EU. Physical Therapist in
DACER Centre.*
