

# Registration for Karolinska Workshop on Metabolic Bone Diseases Stockholm, November 19-20, 2015

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

Address (work): \_\_\_\_\_

Phone (work /  
mobile phone): \_\_\_\_\_

e-mail: \_\_\_\_\_

**Registration fee is 2,500 SEK. Last day for registration is October 12, 2015.**

The registration fee includes lectures, coffee and lunch on Thursday and Friday and dinner on Tuesday evening. In order to adjust our meal orders, please indicate your participation below:

**Yes, I will participate:**

Thursday Nov 19 (coffee and lunch)

☐

Friday Nov 20 (coffee and lunch)

☐

Thursday evening Nov 19 (dinner)

☐

Special considerations (food allergies, need of wheel-chair access, etc.):

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Invoice address (and VAT number) for the registration fee:

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**Participants are requested to arrange their own travel and housing.**

**By signing this registration form you acknowledge that you understand that this is a binding registration.**

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

Signature \_\_\_\_\_

**In case of late cancellation, we may need to charge the participant for any non-refundable cost.**

**Return a signed and scanned copy of your registration to**  
**[eva.horemuzova@ki.se](mailto:eva.horemuzova@ki.se)**

## CASE PRESENTATIONS

The meeting program includes time for case presentations. These presentations should describe patients whose diagnosis is already known as there will not be enough time to discuss challenging patients with unknown diagnosis.

If you have an interesting patient to present, please let us know:

I would like to present a patient with metabolic bone disease

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Give the patient's diagnosis and a 1-3 sentence case description

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## RESEARCH NETWORKING

The workshop aims to promote networking and research collaboration between various centers and research groups. We have reserved time for short presentations by the participants to inform about planned or ongoing research on metabolic bone diseases. If you would like to give a 5-minute presentation of your research area, please let us know:

I would like give a short overview of my / our research

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Your contact information:

**Name:**

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**Address**

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**e-mail:**

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