

Fax: +49 40 / 23 45 22

Please submit your registration by fax!

Or by mail!

FiHH Das Fortbildungsinstitut GmbH & Co. KG
Wandalenweg 14-20, 20097 Hamburg
Represented by:
Fortbildung FiHH Verwaltungsgesellschaft mbH
Commercial register record: Hamburg HRA 110818



REGISTRATION

Please accept my binding registration for the following continuing education seminar(s):

Please complete in block capitals:

Table with 4 columns: Course Title, City, Seminar date, Course Fee [EUR]. Includes a legend for cities: Bad Bentheim (BBH), Bad Neuenahr (BNA)*, Berlin (B), Dresden (DD), Hamburg (HH), Munich (M)**, Bad Salzfluen/Herford (OWL).

Terms and Conditions of Continuing Education Seminar Registration and Attendance

- 1. The seminar organizers are not liable for the accuracy/veracity or applicability of learning content imparted by seminar instructors.
2. Seminar enrollees shall only be entitled to reimbursement of seminar fees paid in the event a continuing education course should have to be canceled on short notice due to illness on the part of the seminar instructor...
3. Seminar enrollees canceling their registration to attend a continuing education seminar - for any reason whatsoever - shall be entitled to reimbursement of the enrollment fee as follows:
4. Reimbursement is not provided for inability to attend on the part of seminar enrollees due to illness or other reasons, as stated on the registration confirmation.
5. Seminar enrollees may not swap seminar registrations. Seminar registrations are awarded and assigned exclusively by the seminar organizers and respective seminar instructors..
6. The registration applicant and the seminar organizers agree that seminar registrations are confirmed when:
7. Seminar attendees enter and utilize seminar facilities at their own risk.
8. Seminar organizers assisting seminar enrollees in obtaining overnight accommodations shall not be liable in connection with services provided by the relevant accommodation providers/hotels.

A copy of my license/professional certification is already on file with you.

Yes No, it is enclosed with this registration.

I will pay the seminar fee(s) no later than 8 weeks prior to seminar begin - or immediately as necessary - by funds transfer to the bank account stated on the seminar reservation.

I have been advised in accordance with applicable law that charges may apply in the event of cancellation or non-attendance. Please send me information and forms regarding seminar withdrawal insurance.

Please put me on the waiting list if my requested seminar(s) should already be full.

I will then be promptly notified when a new seminar date is scheduled.

Please send me a list of hotels and accommodation referral services.

I consent to my name and address being forwarded upon request by other continuing education course participants.

I require educational leave for the federal state of

I have read and accept the Terms and Conditions of Continuing Education Seminar Attendance printed on this form.



Date



Signature

Form with sections: Personal (Last name, First name, Birth date, Street address, ZIP/City or town, Telephone, Cell phone, Fax, E-mail, Occupation) and Business (Practice name, Street address, ZIP/City or town, Telephone, Cell phone, Fax, E-mail). Includes instruction: Please send invoice to the employer below!

Sponsoring legal entity: GBR of FiHH Das Fortbildungsinstitut GmbH & Co KG and Brizen-Bergemann GBR / Sponsoring legal entities of Fortbildung in Munchen GBR are FiHH Das Fortbildungsinstitut GmbH & Co. KG and Physio-Training-Unterröhring GmbH & Co. KG

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FiHH

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