

## Registration form

Name:	
Address:	
Telephone number: Fax:	
E-mail:	•••••
Profession:	
My registration for the following workshop is binding:	
Title of the workshop:	
Conducted by:	•••••
Date of workshop:	
I accept the terms and conditions of business that have been published on the ÖVG-website. The fee for the workshop has been transferred to the following bank account at EASY BAI IBAN AT25 1420 0200 1045 9290, BIC BAWAATWW.  The registration of participants will be processed according to the order in which payment received.	NK:
Date:Signature:	
Send all registrations to Dr. Egon Urban, either by	

Send all registrations to Dr. Egon Urban, either by regular mail: Bernardgasse 26/2, 1070 Wien,

or by e-mail: fortbildung@oevg-gestalt.at