**Experimental Radiobiology and Radioprotection**

Name VAT/NIF

Address

Zip Code City Country

Phone Email

I do not allow my email contact to be revealed in the participants list

Working Place

Academic Degrees

When different than participant, payment receipt made to:

Name VAT/NIF

Address

Zip Code City Country

**Contact**

Cláudia Caridade

Centro de Investigação em Meio Ambiente, Genética e Oncobiologia - CIMAGO

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Phone: 239480240 Fax: 239480258

Mail: acaridade@fmed.uc.pt

**Payment**

By Bank Transfer

Account's Name: ACIMAGO

Bank: Caixa Geral de Depósitos

Swift: CGDIPTPL

IBAN: PT50 0035 0817 00004919730 35

NIB: 0035 0817 00004919730 35

**Please send a fax or e-mail with the transfer confirmation**

**Your registration will be effective only after acceptance and payment of the course fee**