

Registration form

10th WORKSHOP ON MAGNETIC RESONANCE IMAGING AND SPECTROSCOPY (MRI/MRS) APPLIED TO LABORATORY ANIMALS

November 29th - December 2nd, 2016

[versión en castellano](#) | [versió català](#)

PERSONAL DATA

Fields labeled with a star (*) are required.

First name * Last name * E-mail address * Phone *

Category * Other

COMPANY DATA

Institution/Company * Address * . ..

SUPERVISOR

Full name * e-mail address *

BILLING INFORMATION

Registration fee *

1.- If UAB member:

Cost center * Gestor center * Principal Investigator of the cc *

2.- Others, send invoice to (name/company, DNI/CIF, address): *

Registration fee includes handouts and all cost for materials needed during the workshop

PREVIOUS TRAINING ON MRI/MRS

The questions below are related to your past training and expertise in the field of nuclear magnetic resonance imaging and spectroscopy.

Knowledge level on MRI/MRS * Briefly describe your previous experience and/or list MRI/MRS courses attended: Briefly describe your research subject and areas of interest:

Please fill all the letters into the box to prove you're human.



☐ Please keep this field empty:

Submit your data

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