26th European Congress of Trauma & Emergency Surgery

Print Form

25–27 April 2027
Zürich Convention Center/Switzerland

www.estes-congress.org

email: registration@conventus.de

Proof of Status

Herewith we confirm that

Surname, name _____

- ☐ is a Nursing staff
- ☐ is a Resident
- ☐ is a PhD

in our company/institution/organisation.

City, Date _____

Signature and Stamp of the company/institution/ organisation _____