



European School of Prolotherapy Basic Prolotherapy Course 2024

REGISTRATION FORM

Title:

Name:

Address:

City:

Country:

Telephone:

Email:

P.IVA/VAT number:

UPPER EXTREMITY, LOWER EXTREMITY AND SPINE

(English language)

Ferrara, Italy

APRIL 11th – 13th, 2025

Fill out this form and send it via email to:

s.cavallino@gmail.com

PAYMENT

All payment of euro 1600,00 needs to be made within March 20, 2025 by bank transfer to:

European School of Prolotherapy Ltd 1st Mednikarska Str
1510, Sofia, Bulgaria

**BANK: INTERNATIONAL ASSET BANK – Sofia, Bulgaria IBAN CODE:
BG57IABG74321400355101
SWIFT CODE: IABGBGSF**

Once payment has been made for your registration, please send us a copy of payment to s.cavallino@gmail.com and bmitin@abv.bg in order to receive an invoice from our accountant.