

Ambulatory Endoscopy Clinic Day

Saturday, April 10, 2021




Registration Form

 **Register by April 3, 2021**

Register via email or on-line

 On-line:
www.aecd.ca

 E-mail to:
aecdinfo@ymail.com

This registration form may be photocopied

Please indicate: Gastroenterologist Surgeon Other Physician
 Manager Nurse Sponsor Other

Name: _____

Clinic Name: _____

Address: _____

City: _____

Province: _____

Postal Code: _____

Phone: _____

Fax: _____

E-mail: _____

AECD Privacy Policy

AECD produces a virtual Program, which is distributed to delegates on the day of the event. There will be an attendee roster which will include work information of registered delegates: full name, address, telephone, fax and e-mail. This information will not be used for any other purpose.

Print Full Name

Signature
