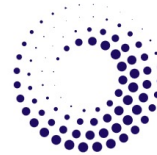




# Italian-Spanish-Turkish International School of Proctology and pelvic floor diseases



19<sup>th</sup>- 22<sup>nd</sup> October 2026  
Sant Joan d'Alacant, Alicante, Spain

## PERSONAL DATA

First Name*	Last Name*
Place of Birth*	Date of Birth*
Tax Code*	Profession*
Practice Specialty*	Address*
City/Sate*                      Postal Code*	Medical Registration N°/City*
Phone*	Email*
Sponsor Invitation *                      YES                      NO	Sponsor Name*

## FISCAL DATA

First Name*	Last Name*
or Company Name*	Vat Code* <b>UNIQUE CODE*</b>
Tax Code*	Address*
City/Country*	Postal Code*
E-mail*	Phone*

**HOW TO REGISTER:** this registration form, duly completed and signed, must be sent to the organising secretariat by e-mail to [info@askservice.it](mailto:info@askservice.it). Registration will be finalised upon payment of the registration fee, to be made no later than deadline date.

**Registration rates are set as follow:**

**COMPLETE TRAINING COST IS:**  
**€ 1.800,00 + VAT\* 22% = € 2.196,00**  
**DEADLINE: 15<sup>th</sup> September 2026**

The registration fee includes: Didactic activities (as program), 3 days of Cadaver Lab activities, Light Lunches\*, 1 social dinner\*  
Final Diploma

**Payment must be by Bank Transfer made out to: ASK SERVICE**  
**Banca Fideuram - INTESA SAN PAOLO**  
**IBAN: IT16M0329601601000067217980 BIC/SWIFT CODE FIBKITMM**

Any additional bank charges must be paid at source in addition to the registration fee. Please specify " SURNAME + **Italian-Spanish-Turkish International School of Proctology and pelvic floor diseases**" on the bank transfer and return the registration form and payment receipt to the organizing secretariat by e-mail ([info@askservice.it](mailto:info@askservice.it)).

**\*\*Please let us know if you have any special needs for food** \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**Use of personal data** - I hereby authorize the use of my personal data in compliance with International Regulations on data privacy