

**Congress**  
**14<sup>th</sup> Genoa Meeting on Hypertension, Diabetes and**  
**Renal Diseases**  
**Genoa – February, 26 – 28, 2015**

Secretariat only

**REGISTRATION**

**PERSONAL DATA**

Surname \_\_\_\_\_ Name \_\_\_\_\_

Title  Mr.  Mrs.  Dr.  Prof. \_\_\_\_\_

Address \_\_\_\_\_

ZIP \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**FOR SIN MEMBERS REGISTRATION IS FREE.**

**Members can send an email to [genoameeting@aristea.com](mailto:genoameeting@aristea.com) with their personal data.**

Date \_\_\_\_\_ Signature \_\_\_\_\_