

**West Midlands Ultrasound Guided  
Venous Access Course  
Education Centre Russell's Hall Hospital**

Wednesday 8<sup>th</sup> December 2010

Registration Form

Title: ..... Forename: ..... Surname: .....

Job Title: .....

Hospital: .....

E-mail: .....

Daytime Tel: ..... Ext/Bleep: ..... Mobile: .....

Address: .....

.....

.....

I wish to attend the West Midlands Ultrasound Guided Venous Access Course

Registration Fee: (including lunch) Trainees £90  Consultants £110

Vegetarian:

Cheques should be made payable to West Midlands Vascular Access

Places limited to 12.

Closing date for the receipt of completed registration form is the 19<sup>th</sup> November 2010

Please forward completed registration form to:

Mrs Sue Spargo  
Anaesthetic Department  
Birmingham's Children's Hospital  
Steelhouse Lane  
Birmingham, B4 6NH

Tel: 0121 333 9623  
Email: [admin@linesrus.co.uk](mailto:admin@linesrus.co.uk)