



**Annual WFHSS Workshop „CSSD“  
Muscat, Oman  
“Crowne Plaza Hotel ”**

P.O. Box 1455, P.C. 112, Ruwi  
Sultanate of Oman

November 01<sup>st</sup> and 02<sup>nd</sup>, 2006

**DELEGATE REGISTRATION FORM**

*Please fax completed form back to: +49 7071295716 or send by e-mail to:  
workshop@wfhss.com by October 01<sup>st</sup> 2006.*

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*Title (Mrs. /Ms./ Mr.) First Name*

*Last Name*

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*Job title*

*Organization*

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*Hospital*

*Department*

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*Address*

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*Country*

*Post / Zip code*

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*Contact e-mail address*

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*Phone Number*

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*Date*

*Signature*

**Workshop registration fee including gala dinner: € 50.-**