**Subscription form Seminar Sicily 2024 with Ewald Stöteler (September 30 - October 5)**

|  |  |
| --- | --- |
| Family name: |  |
|  |
| Name: |  |
|  |
| Date of birth:  |  |
|  |
| Man / Woman: |  |
|  |
| Country: |  |
|  |
| Telephone: |  |
|  |
| E-Mail:  |  |
|  |
| IBAN Bank account number (eventually for refund): : |  |
|  |
| BIC code: |  |
|  |
| On behalf of: |  |
|  |
| Seminar | **September 30 - October 5** | □ € 550.- |
|  |  |  |

The undersigned agrees to the conditions as mentioned on seminarsicily.com:

|  |  |
| --- | --- |
| Date: |  |
|  |
| Place: |  |
|  |
| Signature: |  |

Please send / mail form (you can also mail photo / scan) to:

Roberto Tangel

Koningin Emmakade 99

2518 RN The Hague

The Netherlands

Email: homeopathietangel@gmail.com

Internet: <https://www.seminarsicily.com> / <https://www.homeopathietangel.nl>

Video: https://www.youtube.com/watch?v=Oo0hD066HHg