## Registration

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Institute of Medical Biometry Marsilius-Arkaden, Turm West Im Neuenheimer Feld 130.3 D-69120 Heidelberg

## **Medical Data Science**

## **REGISTRATION FORM**

Binding registration for participation in the "Medical Data Science" certification course.		
Course duration: Winter semester 2022/23 – Summer semester 2023, Tuition fee:		
☐ 4995 EUR (early bookers until 15.05.22)		
☐ 6000 EUR (registration from 16.5.22, regular rate)		
☐ 5400 EUR (registration from 16.5.22, discounted rate for affiliated with a university)		
Billing address:		
•		
Mr/Mrs	Academic or Other Title	
Surname	First name	
Company/Institute*	Department*	
Post code, city or town	Street	
Email		
This is my	address   Home address	
The invoice will be sent to the address provide	ad above. Please pay upon receipt of invoice	
The invoice will be sent to the address provided above. Please pay upon receipt of invoice. *Information regarding Company/Institute and Department is optional: only relevant if providing a		
business address.		
Data Protection Declaration		
I understand that the data provided in this registration form will be stored in accordance with <a href="Art.6">Art.6</a> , <a href="paragraph 1">paragraph 1</a> (b) of the GDPR in a data processing system. The data will be used		
for administrative activities related to the degree programme and for statistical purposes.		
The data will not be shared with any third parties.		
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☐ I hereby confirm that the information I have provided is correct and complete.		
☐ I have read and accepted the provisions of the Data Protection Declaration.		
If you admission to the training programme is approved by the admissions committee. I havely		

If my admission to the training programme is approved by the admissions committee, I hereby register for the programme and accept the general terms and conditions. I understand that my registration is binding.

Place, date	Signature of participant/company stamp