**United Kingdom Haemophilia Centre Doctors’ Organisation Annual**

**General Meeting**

***Thursday 7th and Friday 8th November 2019***

The Pullman Hotel St Pancras,

100-110 Euston Road,

London NW1 2AJ

**Registration Form**

**Name**:

**Hospital**:

**Email address**:

**Thursday 7th November**

I will be attending the Educational Meeting Sessions … … Yes / No

*Please specify any special dietary requirements*:

I wish to tender my apologies for Thursday … … … ………………………………………………………… Yes / No

**Thursday 7th November - Dinner**

In would like to reserve a place at dinner on Thursday evening… … … … … … … … … … … … Yes / No

*Please specify any special dietary requirements*:

**Friday 8th November**

I will be attending the UKHCDO AGM (open to members & special guests by invitation only) … … … Yes / No

*Please specify any special dietary requirements*:

I am unable to attend the UKHCDO AGM and wish to tender my apologies… … … … …… … Yes / No

**Please return this form by Friday 18th October 2019**