





Registration form

Please return this form duly filled out to Cochrane Switzerland per email (registrations will be accepted as long as the course is not fully booked). (Email: suisse.cochrane@unisante.ch)

I would like to register for the following course: **Introduction to Systematic Reviews** ☐ Introduction to Systematic Reviews (1 day) Lausanne, September 7, 2020 Introduction to Systematic Reviews + Meta-analysis (5 days) Lausanne, September 7 to 11, 2020 PERSONAL DATA ☐ Ms. ☐ Mr. Last name: Date of birth: **PROFESSIONAL ADDRESS: PRIVATE ADDRESS:** Employer:.... Street: Street: Postcode and place: Postcode and place: Private phone: Mobile phone: E-mail: E-mail: PLEASE SPECIFY: Billing address professional* ☐ private * Please state (CHUV employees) CGRA:.....CGRB: Adress/Email for correspondence professional private I would like to receive information regarding the activities of ☐ YES \square NO Cochrane Switzerland per email **PREREQUISITE** The participants use their own computer The participants of the meta-analysis workshop have downloaded the Stata software, version 16, prior to the course. The software is included in the registration price and the access code will be sent per email once the registration is confirmed. **Minimum number of registrations**: 10. The course will be **cancelled** if this number is not reached. **TERMS OF PAYMENT** By signing this form and if accepted for the course, the participant commits to paying the whole of the registration fee at least three weeks prior to the course. Any withdrawal within three weeks before the course is subject to a cancellation charge amounting to 50% of the registration fee. The entire fee remains due to Cochrane Switzerland in the case of a withdrawal within a week prior to the course.

Place and dateSignature