Registration form NSVA 2026

Name:

Title:

Email:

Hospital/ Affiliation:

City / Town:

Speciality:

Dietary restrictions? (Yes/no?) please explain:

Please choose your option (X)

Options	Includes	Price (Euro)	Specify day
1	Conference day 1+2 + festive dinner	320	
	One day (please specify day) and festive dinner	230	
	Two days excluding dinner	260	
	One day (please specify day)	130	

NB: The conference fee does not include accommodation: please find links for nearby accommodation at reduced rates in the invitation/ at the NSVA website.

The registration form to be sent as attachment/ mail to Nina Schultz: nischu@ous-hf.no

Registration is confirmed only after the registration fee has been paid

Payment MUST be made within August 15th to

Nordic Society for Vascular Anomalies
c/o Nina Schultz
Oscar Nissens vei 10, 1462 Fjellhamar,
Norway
IBAN: NO43 1503 1335 091
BIC (Swift address) DNBANOKKXXX
(payment from accounts within Norway: 1503.13.35091)

IMPORTANT: NSVA does not send invoice. The organization is not subject to VAT as it is an ideal organization with Norwegian official organization number: 994198335