



## Philips Healthcare Career Discussion Panel Thursday, Oct. 3, 16:45-17:45

| Sign-Up Sheet                                                                                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Email-Address:                                                                                                                                                                                                                                                                                                                                                                                                        |
| Profession/Field of Studies:                                                                                                                                                                                                                                                                                                                                                                                          |
| <ul> <li>□ I want to receive ESMRMB news about scientific events, the educational programme and product developments related to the field of magnetic resonance.</li> <li>□ I agree that my data will be passed on to Philips Healthcare for the purpose of providing me with information for this event as well as information regarding product developments related to the field of magnetic resonance.</li> </ul> |
| Signature:                                                                                                                                                                                                                                                                                                                                                                                                            |
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                 |

