

**II INTERNATIONAL CONFERENCE ON
SPORTS MEDICINE AND REHABILITATION
SPORT AND HEALTH**

TARTU, OCTOBER 22-23, 1999

Registration Form

1. Name..... 2. First name.....
3. Organisation..... 4. Position.....
5. Address.....
6. City..... 7. Postal code.....
8. Phone..... 9. Fax.....
10. E-mail.....
11. Application for - participation.....
- oral presentation.....
- poster.....
12. Need for accommodation Yes..... No.....

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