



**THE PITTSBURGH COURSE:
COMPREHENSIVE ENDOSCOPIC ENDONASAL SURGERY OF THE SKULL BASE
2022 Registration Request Form**

**** Please type or print your answers in BLOCK letters ****

NAME (Given Name/Surname): _____

SPECIALTY (ENT/Neurosurgery): _____

NAME OF UNIVERSITY/HOSPITAL: _____

CURRENT POSITION/TITLE: _____

If resident, list current year of training

CITY: _____ STATE (US only): _____

COUNTRY (if outside US): _____

PREFERRED EMAIL ADDRESS: _____

Please indicate below in order of preference (i.e., 1, 2, 3) which course you would like, and are available, to register for:

_____ **May 18-21, 2022 TENTATIVELY FULL; Waiting List Only**

_____ **November 9-12, 2022**

_____ **December 7-10, 2022**

Please place an "X" beside your registration category:

_____ Team (Teammate's Email Address: _____)

(Teams are preferred and given priority)

_____ Single but I am willing to be paired with another single registrant, should one be available, to form a team

_____ Single Registrant Only

Please send completed form to Mary Jo Tutchko, Course Manager, via email (skullbasecourse@upmc.edu) or Fax (001-412-647-2080). Requests will be reviewed in the order in which they are received.

Space is limited at each course. If we can accommodate you at the course of your choosing, you will receive an invitation and registration form by email. The registration form will need to be completed and returned together with proof of COVID vaccination and payment in full within 30 days. Please do not make any travel arrangements until you have received an email confirmation of your registration.