

Application form

Course on sickle cell disease 24 og 25 November 2026

You can apply digitally or by regular mail: www.sjeldnediagnoser.no

Name: _____

Address: _____

Area code: _____ City: _____

Mobile: _____

Diagnosis:: _____

Date of birth: _____

Partner who wish to attend the course:

Name: _____

Address: _____

Area code: _____ City: _____

Mobile: _____

Do you need an **interpreter** for medical information? Yes No

If yes, which language and dialect: _____

Submit your questions

Fill out the next page of the application form, and we will create a good course based on your input.

What would you like to know?

1. Questions related to the topics presented in the invitation

2. Other questions