



The Australasian College of Cosmetic Surgery

Raising Standards, Protecting Patients

ACCS Liposuction Workshops – 2020 Sydney

- Basic Liposuction Workshop 1 – Date to be confirmed
- Advanced Liposuction Workshop 2 – Date to be confirmed

EXPRESSION OF INTEREST

Surgical experience required, with details to be provided via CV.

Please complete this form, attach CV and medical indemnity insurance certificate of currency.

PARTICIPANT INFORMATION

Date of application: _____

Name: Dr

.....
Last

.....
First

Address:

Indemnity Insurer: (please attach copy)

Policy Number:

Insurance policy must cover liposuction procedures.

Contact Information:

.....
Mobile

.....
Email

I wish to attend: (please tick workshops you wish to attend)

Basic Workshop (*Hands-on*)

Advance Workshop (*Hands-on*)

Basic Workshop (*Observe only*)

Advance Workshop (*Observe only*)

OR Register for both Basic & Advanced Workshop.

Basic & Advanced Workshop
(*Hands-on*)

Basic & Advanced Workshop
(*Observation only*)

To register your interest, please email form to: admin@accs.org.au – attach CV and insurance
