

WITHDRAWAL FORM

(Complete and return this form **before the 18th of April 2024** if you wish to withdraw your registration)

To
Johannes Kepler Universität Linz
Institute of Philosophy and Scientific Method
Altenberger Strasse 69
A-4040 Linz

E-Mail: epicause@jku.at

I, **(name*)**, hereby give notice that I withdraw from my contract for the provision of the following service: Participation at the conference Causality in Epidemiology EPICAUSE 2024.

Ordered on

Name of consumer(s)

Adress of consumer(s)

Signature of consumer(s) (only if this form is notified on paper)

Date

(* Change as appropriate)