



International Master Course on Aging Science

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EVENT NAME IMCAS WORLD CONGRESS YEAR 2020
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Conflict of Interest (COI) Disclosure (tick appropriate)

- I have no potential conflict of interest to report
 I have the following potential conflict(s) of interest to report:

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3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Date 21 / 11 / 2019

Signature [Handwritten Signature]