



DA Refresher

Hosted by the Wits Department of Anaesthesia

21st January 2023

FIRST NAME:	
SURNAME:	
MP NUMBER:	
HOSPITAL:	
E-MAIL:	
CELL:	

Event will take place via **Zoom**

CPD accredited for **7 CEUs**

Cost R900

Email registration form and proof of payment to
witsanaesthesiaupdates@gmail.com

Banking details:

Bank: FNB
Branch Code: 250 655 (universal)
Account name: WHC T/a Dept. of Anaesthesia CH Bara
Account number: 620 569 19974
Account type: Current
Reference: Name + DA

Registrations Close 20 Jan 2023

Please use "Your name + DA" as a reference