



International Master Course on Aging Science

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EVENT NAME IMCAS Amencio 2019 YEAR 2019
 YOUR FULL NAME SAHAR GHANNAM EVENT DATE MONTH August

Conflict of Interest (COI) Disclosure (tick appropriate)

- I have no potential conflict of interest to report
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2 <u>Merz</u>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 <u>Agnesure</u>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I hereby agree with the IMCAS COI POLICY, clearly stated on imcas.com and therefore attest the accuracy of the information given above

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