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**Prof. Pier Luigi Zinzani**

**as special coach for the Cantera**

**“The dynamic revolution of the therapeutic landscape  
in the Management of B-cell and T-cell  
non-Hodgkin lymphomas”**

*Lecce, Italy  
from April 14 to April 17, 2026*

**Application Form**

Center.....

Head of the Center.....

***With the present we request the registration to the course that will be held by Prof.  
Pier Luigi Zinzani in Lecce from April 14 to April 17, 2026 for:***

Dr.....

Phone Number N/A Mobile Phone Number.....

Email..... Fax Number N/A.....

EHA membership .....

\* Participants are expected to arrive for dinner on April 14

\* The registration fee is 1200 Euros (VAT included) and includes: participation to the course, hotel (3 nights), lunch and dinner (starting from the dinner on the April 14 to the coffee break buffet on April 17). Travel expenses are excluded and are in charge of each participant. Participation is confirmed at the time the payment is done (the modalities for the payment will be announced by January 2026).

\* Please note that all accepted participants must be members of the EHA. You can check your EHA membership status by visiting MyEHA or by sending an email to [membership@ehaweb.org](mailto:membership@ehaweb.org). To learn more about eligibility requirements and how to apply, please visit the junior registration page.



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Signature of the head of the center or delegate .....

Date .....

**Return by email to [elisabetta.poti@angelaserra.it](mailto:elisabetta.poti@angelaserra.it)**

*Don't write in the below space (to be filled out by the organizing secretariat):*

Registration received on .....

Registration number .....

Registration fee paid on .....