

18-a IMEK 10.07. – 15.07. 2012
18th INTERNATIONAL MEDICAL CONGRESS

A P P L I C A T I O N F O R M

Last name *man woman
Surname
Birthdate and birthplace --

Profession:

Address: town and zip code:

Street/square, number:

.....Country: -.....

Phone: / Mobil-Tel:

E-mail: @

Web-page:

Arrival: - July 2012. Departure: - July 2012.

Arrival town*:

train station airport Ostrava bus station

Room with one/two lits from -07 – 2012 till -07.2012.

Number of nights:

I would like to share the room with:

.....

Total registration fee 190.- EUR (including meal, accomodations, trips, programme)

I will pay all the costs: on place bank

I would like to give lecture or present the poster* yes no

I need for the lecture:* Projector Computer

Video laptop Pendrive-on CD/DVD disk

Pls, tick X in the box where needed.Thank you!

Application for lecture/poster

Name of speaker/s

| | |
|----------------------------|----------------------|
| Name of the first author: | <input type="text"/> |
| Name of the second author: | <input type="text"/> |
| Co-authors: | |
| | |
| | |

Institute

| | |
|-----------------|----------------------|
| Name: | <input type="text"/> |
| | <input type="text"/> |
| Head/Director/: | <input type="text"/> |

Title of the lecture/poster

In Czech:

In Esperanto:

In English:

