

**PLEASE PRINT CLEARLY**

<b>NAME</b>	<b>Title</b>	<b>First Name</b>	<b>Surname</b>
	<b>INSTITUTION:</b>		
	<b>ADDRESS:</b>		
	<b>CUI/ Fiscal Code company</b>	<b>SNIMTB MEMBER:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
	<b>TELEPHONE:</b>	<b>CNP</b>	
<b>EMAIL:</b>			

This information will be used to complete the receipt for MediTech payment (registration).

One Conference fee includes access to all conference sessions

CONFERENCE FEES	AMOUNT PAID	No.	Value
REGISTRATION FEE FOR SNIMTB MEMBERS	120 € / 600 LEI		
REGISTRATION FEE FOR NON-MEMBERS SNIMTB	200 € / 1000 LEI		
<b>TOTAL PAYABLE</b>			

**MORE INFORMATION REGARDING THE:**

- papers and the level of registration fee:

**MediTech Secretariat**

Email: [ave\\_tour@yahoo.com](mailto:ave_tour@yahoo.com) ; [secretariat@snimtb.ro](mailto:secretariat@snimtb.ro)

Phone: 0040264402379, 0040746210030

- registration fee payment

**SC AVE ACCOMODATION SRL**

**Mirela Giurgiu**

Phone: 0040264597306, 0040745256068,

Email: [office@avetour.ro](mailto:office@avetour.ro); [ave\\_tour@yahoo.com](mailto:ave_tour@yahoo.com)



**9<sup>th</sup> International Conference on Advancements of Medicine and Health Care through Technology – MEDITECH 2024,**  
September 30 – October 2, 2024 Cluj-Napoca



In cooperation with:



**PLEASE INDICATE PAYMENT METHOD**

- BANK TRANSFER Complete FORM 1** – All charges to be paid by Sender. The copy of the Bank Transfer receipt should be sent by email to ave\_tour@yahoo.com. The form can be downloaded from MediTech 2024 website on the “Registration and Fees” page.
- CREDIT CARD Complete FORM 2** – Credit Card Payment and return by email to: ave\_tour@yahoo.com. The form can be downloaded from MediTech 2024 website on the “Registration and Fees” page.

**Cancellation Policy:**

- *No refunds of Conference Registration will be possible.*

I have read and accepted the Cancellation Policy.

**TITLE OF THE PAPER PRESENTED BY YOU**

.....