



EUROPACE 2007

THE MEETING OF THE EUROPEAN HEART RHYTHM ASSOCIATION
Lisbon, Portugal - 24-27 JUNE 2007



Please return this form to: Kristina Simon, Industry Relations Assistant, European Society of Cardiology
2035 Route des Colles, Les Templiers, BP 179 06903 Sophia Antipolis Cedex, France
Tel: +33 (0)4 89 87 20 09 – Fax: +33 (0)4 92 94 76 26 - E-mail: EPsponsorship@escardio.org

1. ORGANISING COMPANY The official company name & address as it should appear in the official listings		
Name:		
Contact Person:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:
2. APPOINTED COMMUNICATIONS AGENCY (if any)		
Name:		
Contact Person:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:
3. ACCOUNTING DATA		
1. Only one invoice address may be used		
2. In the event that an invoice remains unpaid after a settlement date, the ESC reserves the right to deny access to EUROPACE		
Company or agency to be invoiced:		
Contact Person:		
Address: N°:.....	VAT	VAT N°:..... PO N°:.....
Mandatory		Mandatory
Postal code:		
Tel:	Fax:	Email:
Payment will be made by bank transfer (details will be given on the invoice) or by credit card (please fill in the following information) to the ESC.		
<input type="checkbox"/> Visa	<input type="checkbox"/> Eurocard/Mastercard	<input type="checkbox"/> Amex
Credit card N°:	Expiry Date:	Cardholder's Name:
4. Sponsorship & Advertisement item required		
Description: : INDUSTRY WELCOME DESK		Price: €1,000 excluding VAT
5. AGREEMENT I hereby agree to be bound by the GUIDELINES for INDUSTRY PARTICIPATION at EUROPACE 2007 <i>Only signed forms will be accepted.</i>		
Date:	Contact Name:	Signature:

Cancellations

Cancellations should be made by letter addressed to ESC. If a reservation is cancelled by the Signature Company after an invoice has been raised but before 31 January 2007, a 50% cancellation fee will apply. If a reservation is cancelled by the Signature Company after 31 January 2007, a 100% cancellation fee will apply.

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