





## Please sign and return this form by email to:

Industry Services Department – Exhibition: **Email:** <u>EEexhibition@escardio.org</u> For any questions feel free to contact Abir Ghorab (Mrs.): Tel: +33 (0)4 92 94 35 14

## **COMPANY & PRODUCT DESCRIPTION - EXHIBITORS INFORMATION**

Application deadline: 26 September 2012

Please complete with a computer or in BLOCK CAPITALS to avoid misinterpretations & spelling mistakes

1. COMPANY NAME & ADDRESS  Please provide the company name as you wish it to be listed in all our printed and formal documents, i.e. the Final Programme, Web Site, Mobile App.			
Name:			Stand Number:
Address Line 1:			
Address Line 2:			
Postal code:	City:	Country:	
Tel:	Email:		
Fax:	Web Site :		
Please provide a short EuroEcho & other imag	D PRODUCT DESCRIPTION  description of your company or ing modalities 2012. This descript final programme, in the web site a	ion as well as the compa	ny information provided in this

Select up to three categories to be listed under. Where more than three are selected, the first three will be used in publications.		
	Angiographic Viewers	
	Angioplasty	
	Blood Pressure Measurement Equip.	
	Catheter Equipment	
	Clinical Database & Research	
	Clinical Laboratory & Testing Services	
	Computed Tomography	
	Computers	
	Contrast Media	
	Defibrillators	
	ECG Equipment	
	Echocardiography Equip.	
	Education, Teaching Aids	
	Electrophysiology	
	Exercise Equip. & Testing	
	Food Service & Nutrition	
	Holter Equipment	
	Imaging	
П	Instrumentation	
	Invasive Monitoring/Test.	
	Marketing Research	
	Non-Invasive Monitor/Test.	
	Non-profit Organization	
	Pacemakers	
	Patient Monitoring System	
	Pharmaceuticals	
	Physician Practice Services	
	Protheses/Valves/Pumps	
	Publishers/Books/Journals	
	Pulmonary Function	
	Recruitment	
	Rehabilitation Centers	
	Stents	
	Supplies	
	X-Ray Equipment	

3. PRODUCT CATEGORIES