



**BASICS OF MRI HOW I DO IT ?
FEMALE /MALE PELVIS MR IMAGING
TEL AVIV MAY 4, 2017**

**CROWNE PLAZZA TEL AVIV CENTER
136 Mechachem road Azreli Center Tel AVIV**

REGISTRATION FORM FOR THE MEETING "HOW I do IT":

Please fill this form with CAPITAL LETTER and return it

FAX: 972-3-546 02 54 or email: fred@privilege-tours.co.il

Name :

.....

First name:

.....

MD Technologist

Institution Medical Center

Email:

.....

FEES

Free :if you are AFiIM Member for 2017.

For the others :

140NIS (give right to course,lunch,coffe break,andParking)

How to pay?:

Credit card (Visa/Mastercard only)

Card Number: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| cryptogram |_|_|_|

Date of end (MM/AA) |_|_| |_|_|

Name of the card:.....

I authorize the owner of the card debit on the sum of 140NIS

Date: __/__/__ signature :

Important: Please keep this form with you at the AFiIM registration desk on May 4 2017