



INTERNATIONAL
ACADEMY OF
CARDIOLOGY

INTERNATIONAL ACADEMY OF CARDIOLOGY
ANNUAL SCIENTIFIC SESSIONS 2018
23rd WORLD CONGRESS ON
HEART DISEASE

BOSTON, MA, USA, JULY 27-29, 2018

APPLICATION FOR EXHIBIT SPACE

Please complete and return form, together with your payment to:

Exhibition Organizer

INTERNATIONAL ACADEMY OF CARDIOLOGY
Annual Scientific Sessions 2018
23rd WORLD CONGRESS ON HEART DISEASE
PO Box 17659, Beverly Hills, CA 90209, USA
Tel: +1 310 657 8777 Fax: +1 310 659 4781
E-mail: klimedco@ucla.edu

Identification

Please complete this section accurately: The information you provide will allow us to correspond with you efficiently, and will also be used on your Exhibitors' badges at the Congress.

Please TYPE or PRINT IN BLOCK LETTERS

Name of Company: _____

Full Address _____

Street _____

City, State _____

Country _____ Zip/Postal Code _____

Telephone: Country code/city code/number _____

Fax: Country code/city code/number _____

E-mail for communication _____

Email to be published in Program Book _____

Person in charge of exhibit: _____

Family Name _____ First Name _____ Title _____

Full names of Exhibitors (Two badges per 100sq.ft). If more than two names are required, please use a separate page as necessary

Family Name _____ First Name _____ Title _____

Family Name _____ First Name _____ Title _____

A project of: CARDIOLOGY ONLINE

INTERNATIONAL ACADEMY OF CARDIOLOGY, PO Box 17659, Beverly Hills, CA 90209, USA,
Tel: +1 310 6578777 Fax: +310 659 4781 Email: klimedco@ucla.edu Website: www.CardiologyOnline.com



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2.

We wish to participate in the exhibition within the framework of the
 23rd WORLD CONGRESS ON HEART DISEASE

No. of Booths _____ totaling _____ sq. ft. at US\$ 24 per square feet
 (minimum booth space, 100 square feet)

Enclosed is check no _____ representing 50% of the total payment.
 Check to be made payable to the International Academy of Cardiology

Applications submitted after April 30, 2018 will require full payment.

DESCRIPTION OF PRODUCTS / SERVICES:

(for publication in the official program. Please do not exceed 60 words)

WE HAVE READ THE REGULATIONS AND AGREE TO OBSERVE AND BE BOUND BY THEM:

Family Name _____ First Name _____ Title _____

Date _____ Signature _____

Corporate Stamp _____