

INTERNATIONAL CONFERENCE OF COVID-19

CONCOVID Registration Form

A. PERSONAL INFORMATION

Name-Surname		Title	
E- mail		Mobile Phone Number	
Instution			
Address			

B. PAYMENT INFORMATION

Name of Bank	IS BANK
Recipient	Cihan Yavuz Tas
IBAN No :	(TR) 41 0006 4000 0021 3000 8334 61 (EURO) (For Foreign Participant)
IBAN No:	(TR) 19 0006 4000 0011 1270 5780 29 (TL) (For Turkish Particioant)
Telephone Number :	+90 850 885 37 32
**Participation fees can be sent via WESTERN UNION	Please share MTCN number when you finalize the payment via Western Union.

I have read this agreement International Conference of Covid-19 (CONCOVID) that is to be held on June 12-13-14, 2020 and agree to the terms and conditions. I hereby confirm that the information I have provided above is true and accurate.

Date :
Name Surname :
Signature :

For further information please contact:
e-posta: info@conccovid.org