



Joint Meeting of Istanbul Spine Masters & ISMISS Turkey 2016

Current Trends in Spine Surgery

September 29 - October 2, 2016

Koç University Hospital, Topkapı - Istanbul, Turkey



Vehbi Koç Vakfı



KOÇ UNIVERSITY HOSPITAL

PAYMENT TYPE : BANK TRANSFER CREDIT CARD

BANK DETAILS

ACCOUNT NAME : PRIME CONGRESS
BANK NAME : T. İŞ BANKASI
BRANCH NAME : SUADIYE
BRANCH CODE : 1176
ACCOUNT NO : 0698745 (EURO)
IBAN NO : TR84 0006 4000 0021 1760 6987 45 (EURO)

CREDIT CARD DETAILS

NAME & SURNAME :
CREDIT CARD TYPE : VISA MASTERCARD
16 DIGIT CARD NUMBER :
EXPIRATION DATE : /
CVC (3 Digit Safety Code) :
Total Amount : .-EURO
DATE : / /

* I hereby authorize PRIME Congress to withdraw the related amount from my credit card.

* Only euro amount will withdrawn from the credit cards. For other currencies, kindly contact with the organization secretariat.

SIGNATURE : _____

INVOICE DETAILS

COMPANY NAME : _____

INVOICE ADDRESS : _____

TAX OFFICE : _____

TAX NUMBER :

ORGANIZATION SECRETARIAT



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