

CREDIT CARD PAYMENT FORM FOR MEDICINES FOR EUROPE EVENT FEES Credit Card: VISA or MasterCard (we do not accept American Express)

You can communicate the credit card info on the phone to Lucia Romagnoli (T: +44-7562-876873) or you can complete this form IN CAPITAL LETTERS and fax it back to the Medicines for Europe Office at +32-2-736-7438 before the event.

As a security measure, please NEVER send credit card details by e-mail.

Please note that credit card details will be submitted manually on the Ogone website https://secure.ogone.com/ncol/prod/admin_ogone.asp?branding=ogone&lang=1 which is PCI-DSS compliant. Immediately after the payment credit card details are destroyed. Unfortunately however this offers NO guarantee or warranty to any third party that the company is invulnerable to attack or breaches in its security therefore we cannot accept any liability towards any third party in the event of loss or damage of any description caused by any failure or breach of security.

EVENT NAME:	
EVENT DATE:	
DELEGATE NAME:	
COMPANY NAME:	
E-MAIL ADDRESS:	
REFERENCE INVOICE:	AMOUNT TO PAY IN EURO:
CARD HOLDER'S NAME:	CVC CODE:
CARD NUMBER:	EXPIRY DATE:
SIGNATURE:	DATE:
Credit card receipts will be sent to the e-mail address provided in this form.	
For more information please send an e-mail to events@medicinesforeurope.com	