

## Radiology in Crete Greece: Scientific / Social Registration

Email Address:

Last Name:  M.D.  D.O.  Dr.

First Name:

Companion Name(s)

Companion Email(s)

Badge Name(s) **(Print all names as you would like them to appear on name badges)**

Address:

City, State/Province:

Zip/Postal Code:  Country:

Phone: (home)  (work)  (mobile)

- |   |            |                             |
|---|------------|-----------------------------|
| <input type="checkbox"/> Scientific Registration ( <b>before</b> February 1, 2022):   | \$2,595.00 |                             |
| <input type="checkbox"/> Scientific Registration ( <b>after</b> February 1, 2022):    | \$2,795.00 |                             |
| <input type="checkbox"/> Plus 5 <b>SAM</b> (Self Assessment <b>M</b> odules) Credits: | \$250.00   | Total: <input type="text"/> |
| <input type="checkbox"/> Social Registration (companion(s)):                          | \$575.00   |                             |

**There will be no refunds after June 03, 2022. Before then there will be a cancellation fee of \$350.00**  
**Radiology International's full Terms & Conditions may be found on our website - [www.radiologyintl.com](http://www.radiologyintl.com)**

Payment Method:  Visa  American Express  MasterCard  Cheque

Card / Cheque #:

Exp Date:  Security Code:  Total Enclosed: \$

Authorized Signature:

**Please Email this Form to [Claudia@Radiologyintl.com](mailto:Claudia@Radiologyintl.com)**

Please complete, then print and mail with your check or money order payable to: Radiology International, Inc.,  
Mailing Address: Sanditz Travel, 945 Farmington Avenue, West Hartford, CT 06107, Telephone: 860-344-7090  
Or, to pay by credit card scan and email this form to [claudia@radiologyintl.com](mailto:claudia@radiologyintl.com)

**\*\*In addition to the registration form, kindly read, sign and return the [COVID-19 Waiver](#) found on our website - [www.radiologyintl.com](http://www.radiologyintl.com)**