



Name:	Date:
Email address:	
Address:	

## **Credentials submission fee for residencies started AFTER 1<sup>st</sup> Jan 2009:**

100€ ()

Additional payments (please indicate):\_\_\_\_

Payment can be made by credit card or bank transfer. Cheques or cash are not accepted. Please indicate the method of payment by ticking the appropriate payment option below.

## **CREDIT CARD**

Credit card provider	VISA	MASTERCARD
Card holder name		
Credit card number		
Validation or security number (last 3 digits on the back of the card – without these numbers the transaction will not be possible)		
Card expiry date	MONTH	YEAR

Please note that credit card details will be destroyed when the transaction is complete and reconciled with the bank statement

## **BANK TRANSFER**

Bank: Address:	Commerzbank Hannover, Germany Theaterstrasse 11-12, 30159
Account Name:	Hannover, Germany Europ. Kolleg. f. Veterinaerneurologie / ECVN

SWIFT Code:	COBADEFF 250
IBAN Number:	DE34 2504 0066 0303 3800 00

Bank transfer made on date

Please provide your name and the details of your membership (ECVN or ESVN) as a reference on the bank transfer. If bank charges apply they will be debited to the payer's account.

Please email the completed form to the treasurer (<u>treasurer@ecvn.org</u>) once the payment has been made. You will receive a receipt by email to confirm your payment. By submitting this form you accept our <u>Terms and Conditions</u> including our <u>Privacy Policy</u>.