

ECIO 2018 Reduced Fee Confirmation Letter

Thank you for your interest in attending ECIO 2018! Please complete this page to upload it as part of the ECIO 2018 online registration process for Residents, Nurses and Radiographers.

Registrant	
CIRSE ID:	DOB (dd/mm/yy):
First name:	Last name:
Place of Employment/Educational Insti	itute
Name:	
Department:	
Street:	
Postal code:	
City:	
Country:	
Office/Institute Stamp:	
Confirmation by supervisor/educator:	
I, (Title) (First name)	(Last name),
as the above-mentioned applicant's (po confirm that they are currently a;	sition),
Resident/Nurse/Radiographer (please of	delete) at the above-mentioned office/institute.
Supervisor's signature:	
Applicant's signature:	Date:

Thank you for completing your ECIO 2018 confirmation Letter! Please have it ready to be uploaded for the ECIO 2018 online registration process. If you have any further queries, please feel free to contact registration@ecio.org.