

**The XXV-th National Congress of Hepatology  
The V-th Romanian-French Hepatology Meeting  
The VI-th Balkan Hepatology Course**

24 - 26 September 2015  
Pullman Hotel World Trade Center, Bucharest

**LOGISTIC FORM**

Please return this form by Email: mihai45@gmail.com or Fax: +4021.3119190

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Title:                      Prof.                      Dr.                      Mr.                      Ms.

**LAST Name:**

**FIRST Name:**

**Email:**

**Cell Phone (please specify your country cod):**

*Required in case of emergency*

**Address:**

**Affiliation:**

**City:**

**Country:**

**Zip code:**

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**TRAVEL DETAILS**

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**Please make my flight arrangements as indicated below:**

	OUTWARD	RETURN FLIGHT
Date:	_____	_____
From:	_____	BUCHAREST
To:	BUCHAREST	_____
Flight Number:	_____	_____
Departure time:	_____	_____
Arrival Time:	_____	_____
Frequency Flyer Number:	_____	_____
Special Requirements:	_____	

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<b>Date:</b>	<b>Signature:</b>
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