(Application Form)

Attention to: Exhibition Secretariat care of

Date: MM / DD / 2019

Japan Medical Imaging and Radiological Systems Industries Association (JIRA) mailto: exhibit@jira-net.or.jp

**the 59th Annual Scientific Meeting of the Japanese Society of Nuclear Medicine**

**the 39th Annual Meeting of the Japanese Society of Nuclear Medicine Technology**

**Application for Exhibition**

Company/Organization/Sciety Name:

Address:

Person in charge (Name):

Title: TEL.: FAX:

E-mail:

1. Unit with assembled panels: Please circle the area size you prefer 20 m2 40 m2 50 m2
2. Unit with basic fittings: Please fill in the number of booth(s) you prefer.

 A-type booth (6 square-meter type): psc.

 B-type booth (4 square-meter type): psc.

 C-type booth (3 square-meter type): psc.

Corner booth preference: ( ) Yes ( ) No

Society booth (2 square-meters type): pcs.

- End -