



EACVI LABORATORY ACCREDITATION: REGISTRATION FORM

Laboratory details:

Name: _____

Head: _____ Email: _____

Address: _____

Country: _____

Contact: *(we recommend that you designate a person who will be responsible for filling the forms on the EACVI*

Laboratory online platform. This person will have to use his/her my ESC account details to login on the platform) or create one.

Name: _____ Surname: _____

Email: _____ Phone: _____

Please select the option depending on the modules you wish to register your laboratory to. Note you must add the VAT if applicable to the following fees.

The application fee is €500 for the first module (**TTE mandatory, TEE or Stress Echo**) and €250 for each additional module if applying for several modules at the same time.

If subsequent modules are applied for separately, the cost is €500 each.

Application fees are payable when registering the EACVI Laboratory accreditation process and are not refundable.

Laboratories can apply from **1 to 3** modules.

Options <i>Please tick</i>	Module TTE	Module TEE	Module Stress Echo	Total Fees
Option 1 <input type="radio"/>	x			€ 500
Option 2 <input type="radio"/>	x		x	€ 750
Option 3 <input type="radio"/>	x	x		€ 750
Option 4 <input type="radio"/>	x	x	x	€ 1000
For laboratories already accredited in TTE by EACVI				
Option 5 <input type="radio"/>		x		€ 500
Option 6 <input type="radio"/>			x	€ 500
Option 7 <input type="radio"/>		x	x	€ 750

Language in which the Modules will be submitted: _____

Invoice details:

Address: _____

VAT Reference: _____

→ **Payment by Bank Transfer:** *(paying by bank transfer will speed the payment process)*

(Please specify your Name and Subject of Bank Transfer, ex: « Lab xxxx + city, EACVI Laboratory Accreditation»)

and send us a copy of the bank transfer order.

Bank Name : BANQUE POPULAIRE DE LA COTE D'AZUR, NICE

Holder: ESC Accreditations

IBAN: FR76 1560 7000 6537 0190 4272 302

BIC / SWIFT: CCBPFRPPNCE

→ **Payment by Credit Card:**

For security reasons please call the 04-92-94-76-00 and ask for the Laboratory Accreditation Certification Office to communicate your credit card details.

Please send back this form to ESCcertification@escardio.org

Date :

Signature :