



# International Bureau for Epilepsy

## International Epilepsy News Subscription Form

**Please complete using BLOCK CAPITALS**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Country: \_\_\_\_\_

Email: \_\_\_\_\_

Fax No: \_\_\_\_\_

### **Payment Details**

Payment may be made by credit card or by bank draft.

#### **Credit Card Details**

Card Type:  Mastercard  Visa

Cardholders Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVC: \_\_\_\_\_

**Please note:** CVC (Credit Validation Code) is the 3-digit number to the right of the signature bar on the back of the credit card

Subscription Period:  3 years (US\$30)  5 years (US\$48)

#### **Bank Draft Details:**

Issuing Bank: \_\_\_\_\_

Draft Number: \_\_\_\_\_

**For Office Use Only:**

Date Received: \_\_\_\_\_  
Amount: \_\_\_\_\_  
First Issue: \_\_\_\_\_  
Last Issue: \_\_\_\_\_

If payment is by credit card, the completed form may be submitted by fax or by regular mail.  
If making payment by bank draft please remit the completed form and payment by regular mail.

International Bureau for Epilepsy, 11 Priory Hall, Stillorgan, Dublin 18, Ireland  
Fax: +353 1 2108450 Email: [ibedublin@eircom.net](mailto:ibedublin@eircom.net)