

**MEDICAL DEVICES MEETINGS 2018
MARCH 7 – 8 2018, STUTTGART, GERMANY
REGISTRATION FORM**



INVITATION RESERVED FOR CONTRACTORS OF THE MEDICAL DEVICES INDUSTRY

YOUR REGISTRATION INCLUDES

- 1- **The complete organisation of targeted meetings** over 2 days.
- 2- **Your participation to the sessions** organised as part of the **Medical Devices Meetings**.
- 3- **The Medical Devices Meetings catalogue** that includes the detailed presentation sheets of the companies attending the convention.
You will choose the companies you wish to meet from the information contained within the file.
- 4- **Your lunches** on March 7 – 8, 2018.

IDENTITY

Company:..... Group :

	Name, First name of Participants	Position	E-mail	Mobile
1
2
3

Complete Address:.....

Post Code: Town: Country:

E-mail:..... Web site:.....

Tel:..... Fax: Co. Registration n°: Legal Status:

PRESENTATION OF THE COMPANY

Main activity:.....
.....
.....
.....

Date of creation: Number of employees:.....

Turnover (millions of EURO):



NATURE OF PARTICIPATION

- Purchasing
- Design
- Production
- Sub-contracting
- Quality
- Engineering
- Manufacturing, industrialization
- Research & Development

RANGE OF PRODUCT TECHNOLOGIES & SOLUTIONS

- Surgical Instruments
- Articles of Daily Use
- Endoscopy
- Dental Care
- Sterilisation, Equipment, Hygiene
- Therapeutic Systems and Devices
- Implants/ Exoprothesis
- Patient Diagnostics
- Imaging Techniques
- in-vitro Diagnostics
- eHealth/Telemedicine
- Laser Technology/Optical Systems
- Operating room equipment
- Tissue Engineering/ Regenerative Medicine

DESCRIPTION OF PRODUCTS AND/OR SERVICES SOUGHT

Please give precise and concise details about your needs to enhance the meetings' quality.

Technical description of your needs:

.....

.....

Projected applications:

.....

.....

Certificates and approvals required:

.....

.....

◆ **MANUFACTURING**

ELECTRONICS AND ELECTRICAL

- Sensors, controls, measures
- Winding
- Wiring
- Connection
- Control systems
- Electrical devices
- Printable electronics
- Conductors
- Advanced lighting
- Open system architecture
- Robotics
- Maintenance, repair, testing
- Other (specify):

MECHANICS AND METALS

- Micro-mechanics
- Extrusion
- Processing
- Post-treatments
- Prototyping
- Integration, clean room
- Other (specify):

COMPOSITES & PLASTICS

- Organic matrixes
- Thermal setting matrixes
- Skin packaging
- Polymerization
- Machining and assembly
- Non-destructive tests
- Material specification
- Processing material
- Bonding
- Thermoplastics
- Thermoset
- Injection
- Molding
- Extrusion
- Pultrusion
- Thermoforming
- Compounding
- Other (specify):

◆ **PROCESSES**

SCIENTIFIC AND INDUSTRIAL IT

- Information and communication systems
- System architecture
- Communication network
- Digital imaging
- Operating system
- Command control
- Process management
- Modeling, simulation, algorithm
- Data support for network systems
- Analysis
- Grid & hybrid networks
- Mobile & wearable computers
- Multimedia semantics
- Other (specify):

SOFTWARE

- Software development
- Software engineering
- Software tools
- Software quality and product insurance
- Reusable, upgradeable software
- Other (specify):

◆ **TECHNOLOGIES, EQUIPMENT, SYSTEMS**

OPTICS AND ELECTRO-OPTICS

- Analysis & engineering of optical system
- Optical components -incl. micro-optics
- Electro-optical devices
- Laser systems and technologies
- Optical instruments and sensors
- Other (specify):

PRODUCTS & SYSTEMS

- Filters
- Pumps
- Catheters
- Valves
- Laboratory equipment
- Other (specify):

◆ **SERVICES**

- Design, Research and Development Services
- Testing, certification, quality assurance
- Consultants

◆ **OTHER (if not in the list):**

.....

CONFIRMATION OF ATTENDANCE

I agree to participate in the **MEDICAL DEVICES MEETINGS**

IMPORTANT

Medical Devices Meetings is based on a concept that relies on the selection of companies and the organisation of pre-programmed business meetings. Due to this, cancellations will be highly detrimental to the participation of others.

I would like to receive an invitation for **Medical Devices Meetings** and **I agree to attend the manufacturing forum or, should I be unable to attend at the last minute, to delegate a representative from my company.**

Competent replacement's title, first name, last name:

Signed in (city) :

Date

By (Name) :

Signature and business stamp:

Please return the completed form as soon as possible:

- ✓ **By mail : ABE / Medical Devices Meetings 2018
35-37, rue des Abondances - 92100 Boulogne-Billancourt cedex – France**
- ✓ **By email : lnitsche@advbe.com**
- ✓ **Phone: 0033.141.86.4161**