

# DIA 会员申请表

中国北京海淀区中关村西区海淀东三街2号欧美汇大厦七层766室，邮编：100080

电话: +86.10.6260.2240

邮箱: dia@diachina.org



新会员

会员续费

## 1. 会员信息

先生 女士 博士 教授

姓: \_\_\_\_\_ 名: \_\_\_\_\_ 单位: \_\_\_\_\_

职务: \_\_\_\_\_ 地址: \_\_\_\_\_

国家: \_\_\_\_\_ 省: \_\_\_\_\_ 城市: \_\_\_\_\_ 邮编: \_\_\_\_\_

电话: \_\_\_\_\_ 手机: \_\_\_\_\_ 电子邮箱: \_\_\_\_\_

## 2. 会员类型

电子会员 (1年) - 800元

电子会员 (2年) - 1440元

电子会员 (3年) - 2040元

标准会员 (1年) - 1000元

学生会员 (1年) - 200元

团体会员 (10人/年) - 6800元

提示: DIA会员为实名制个人会员, 会员资格仅限本人使用, 不得转让。会员费一经缴纳, 不予退还。

## 3. 付款方式

### 银行汇款:

收款方: 迪亚恩(北京)医药信息咨询有限公司

开户行: 中国银行北京市朝阳区支行营业部

银行帐号: 333757195112 SWIFT Code: BKCH CN BJ 110

银行地址: 北京市朝阳区东三环北路霞光里18号佳程广场A座一层

## 4. 发票信息

增值税普通发票

增值税专用发票

发票抬头: \_\_\_\_\_

服务类别: 会议费 咨询费

以下项目为增值税专用发票必填项目:

企业纳税人识别号(企业税务登记证码): \_\_\_\_\_ 单位电话: \_\_\_\_\_

银行帐号: \_\_\_\_\_ 开户行(银行/支行): \_\_\_\_\_

单位注册地址: \_\_\_\_\_

如果您需要快递发票, 请准确填写:

收件人地址: \_\_\_\_\_

收件人姓名: \_\_\_\_\_ 联系电话(建议填写手机): \_\_\_\_\_

# DIA Membership Application

7/F, Room 766, Metropolis Tower, No.2 Haidian East Third Street, Zhongguancun Xi Zone,  
Haidian District, Beijing 100080, China  
Tel. +86.10.6260.2240 email. dia@diachina.org



New Member

Renewal

## 1. Member Contact Information

Mr Mrs Ms Dr Professor

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Job Title: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Tel.: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

## 2. Membership Type

eMembership (1 year)	- 800 RMB	Standard (1 year)	- 1000 RMB
eMembership (2 years)	- 1440 RMB	Student (1 year)	- 200 RMB
eMembership (3 years)	- 2040 RMB	Group (10 Memberships/year)	- 6800 RMB

*Note: DIA membership is individual membership. Membership is not refundable or transferable.*

## 3. Payment Method

### Bank Transfer

**Payee:** DIA (Beijing) Healthcare Information Consulting Limited

**Bank Name:** Bank of China, Beijing Chaoyang Sub-branch Banking Dept.

**Bank Account:** 333757195112 **SWIFT Code:** BKCH CN BJ 110

**Bank Address:** 1st Floor, Tower A, Gateway, No.18 Xiaguangli, North Road, East Third Ring, Chaoyang District, Beijing, 100027, P.R.China

## 4. Fapiao Information

VAT Fapiao

VAT Return Fapiao

Fapiao Name: \_\_\_\_\_ Service: Meeting Consultation

*If you need VAT Return Fapiao, Please provide the information below*

Tax Registration #: \_\_\_\_\_ Accounting Tel.: \_\_\_\_\_

Bank Account: \_\_\_\_\_ Bank Name: \_\_\_\_\_

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

*To receive Fapiao in mail, please provide the mailing address below:*

Receiver: \_\_\_\_\_ Phone/Mobile: \_\_\_\_\_