

Application Form for Device Exhibition
The 18th World MISS Summit with The 8th ISMISS

Please fill in the information below and send it to the following
E-mail address : miss@itoortho.or.jp

【Company Name】

•

【Contact Person】 :

•

【Email Address】 :

•

【Names of Participants on the Exhibition Day: 】

•

•

•

•

•

•

【Scheduled Bank Transfer Date】

※Exhibition Booth Fee: JPY 150,000-

•

【Bank Transfer Information:】

- Bank Name : THE GIFU SHINKIN BANK, Markets & International Division
- Address : 6-11, Kandamachi, Gifu City, Gifu 500, Japan
- SWIFT Code : GFSBJPJZ
- Branch Name : Inuyama Branch
- Account No. : Savings Account No. 1156649
- Account Name : World MISS Summit, DAIHYOUSEWANIN ITO ZENYA

【Submission Deadline】 February 16, 2026

【Contact Information】

- Aichi Spine Institute
- 31-1, Kamiike, Goroumaru, Inuyama-shi, Aichi, 484-0066, Japan
- Tel: 0568-20-9100
- From overseas: +81-568-20-9100 / Fax: +81-568-20-9107
- E-mail: miss@itoortho.or.jp