

## SCIENTIFIC EVENTS

### **1. International Conference: “Traditional Medicine and Materia Medica in Medieval Manuscripts”**

It will be held in Baku during June 12-14, 2006.

Contact Address:

Prof. Dr. Farid Alakbarli

e-posta: alakbarov\_farid@hotmail.com

farid64az@yahoo.com

### **40th International Congress on the History of Medicine**

It will be held in Budapest during August 26-30, 2006.

Contact Address:

Hungarian Academy of Sciences Office for International Cooperation

Ms Klara Papp

1051 Budapest, Nador u. 7 HUNGARY

Tel: 36-1-327-3000/2538

Fax: 36-1-411-6370

E-mail:

Website:

### **2. Symposium on Medical Ethics and Law with International Participation “High – Tech Medicine and the Physician – Patient Relationship”**

It will be held in İstanbul during September 12-13, 2006.

Symposium President

Prof. Dr. Öztan Öncel

Contact Address:

Dr. Hakan Ertin

e-mail: hakanertin@gmail.com

Dr.Elif Atıcı

e-mail:elifatici@uludag.edu.tr

### **1. International Congress on Medical Ethics and Law**

#### **Conflicts of Medical Ethics and Law in Organ and Tissue Transplantation**

It will be held in Antalya during September 18 – 20, 2007.

Congress Presidents:

Doç. Dr. Zafer Zeytin

Yrd. Doç. Dr. Murat Türe

Dr.Hafize Öztürk Türkmen

Contact Address:

Asis.Sezer Erer

e-mail: sezistan@yahoo.com

### **1. International Congress on the Turkish History of Medicine**

#### **10. National Congress on the Turkish History of Medicine**

It will be held in Konya during May 20 – 24, 2008.

Congress Presidents:

Prof. Dr. Ayşegül Demirhan Erdemir

Prof. Dr. Yusuf Küçükdağ

Prof. Dr. Öztan Öncel

Dr. Berrin Okka

Contact Address:

Dr.Sezer Erer

e-mail: sezistan@yahoo.com

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

## الجمعية الدولية لتاريخ الطب الاسلامي

International Society for the History of Islamic Medicine

(ISHIM)

طلب التحاق

### Application for Membership

- Regular member (\$25 or QR 95) (عضو منتظم (25 دولار أميركي أو 95 ريال قطري)  
 Student member (\$10 or QR36.50) (عضوية الطلاب (10 دولارات أو 36,5 ريال قطري)

Name : الإسم :

Occupation/work : المهنة :

Postal Address : العنوان البريدي :

Tel : الهاتف : Fax: الفاكس :

E-Mail : العنوان الإلكتروني :

Personal Data : معلومات ذاتية :  
(Attachment of a short CV copy is preferred) (يستحسن إرفاق نسخة من السيرة الذاتية مع الطلب)

Signature: ..... الإمضاء :  
طريقة الدفع :

Payments :  
 Credit Card number : ..... Exp. Date.....  
 Visa  Master card  American Express

Draft/Money order (payable to the: International Society for History of Islamic Medicine - ISHIM)

Bank details: QNB – Doha/Qatar ( US\$ Acct # 0055-068990-060 - QR Acct # 0055-068990-001)

Signature:.....

For Official Use : للإستعمال الرسمي :

Date : ..... التاريخ :

Please send this application to:

Dr.H.A.Hajar Al Bin Ali

P.O.Box : 5666

Doha – Qatar

Fax: (974) 4443447

الرجاء إرسال الطلب إلى :

د.حجر أحمد حجر البنعلي

ص.ب : 5666

الدوحة قطر

فاكس : (974) 4443447