EuroIntervention

REPRINT/E-PRINT ORDER FORM

1/3

The official Journal of EuroPCR and the European Association of Percutaneous Cardiovascular Interventions (EAPCI)

IMPACT FACTOR: 7.6 - 2023 Journal Citation Reports[®] Science Edition (*Clarivate Analytics, 2024*)



Pllease indicate **full details of the article**, whether you require it in **print** or **PDF format**, the **quantity** and **shipping information** (if applicable) and your **payment details**.

The form must be sent to reprint@eurointervention.org

ARTICLE INFORMATION

Article title and DOI	
Author, et al.	
Publication month/year	
Number of pages	
(Please note that online supplementary	data are only for e-Print option)
Quantity of reprints	

WHICH SERVICE

□ REPRINT

This option provides you with high-quality printed copies, full colour including a front cover. Minimum order quantity is 100 copies.

Prices are indicated on the next page: please note that shipping cost is not included.

□ E-PRINT

This option gives you access to the electronic high-resolution PDF of the article that you can print. While there are no restrictions on the quantity of prints, please note it is strictly for non-commercial use. The royalty fee is set at $\leq 3,900$.







2/3

REPRINT OPTION

⚠If you did not select the Reprint option, please skip to the payment section on page 3.

QUANTITY

Reprint cost:

Postal/ZIP Code

Tel

Email

	100 copies	250 copies	500 copies	1000 copies	1500 copies	2000 copies	2500 copies	3000 copies
4 pages	€700	€1,100	€1,800	€2,000	€2,100	€2,300	€2,500	€3,000
8 pages	€1,000	€2,000	€2,200	€2,500	€3,000	€3,400	€3,800	€4,200
12 pages	€1,200	€2,900	€3,100	€3,600	€4,200	€4,500	€4,900	€5,500
16 pages	€1,400	€3,500	€3,800	€4,400	€5,100	€5,500	€5,900	€6,600
20 pages	€1,600	€3,700	€4,000	€4,600	€5,300	€5,700	€6,100	€6,800

Prices are excluding VAT (VAT rate: 20%)	
For other quantities, please contact us: rep	rint@eurointervention.org Please note that
shipping cost is not included.	
SHIPPING INFORMATI	ION
Do you want to use your ow	rn carrier? (Please tick relevant box)
□ YES Please indicate	Name of carrier:
	Your account number:
□ NO Shipment will be mad	e using our UPS carrier.
Kindly note that shipping charges w	ill be included in the final invoice upon receipt of your order confirmation.
Shipping address (if different from	your invoicing address)
Name	
Institution	
Address	







EuroIntervention

REPRINT/E-PRINT ORDER FORM

3/3

PAYMENT DETAILS

Payment can be made by credit card or bank transfer. Bank cheques are not accepted. **Reprints or E- print will be sent once payment is received.**

□ CREDIT CARD (Visa or Mastercard only)				
I, the undersigned				
Cardholder's name				
authorise Europa Group to debit the sum of $\ensuremath{\mathfrak{\epsilon}}$	on my cred	on my credit card.		
Card number	Exp. date (month/year)	Note the last 3 figures of the number on the reverse side of your card		
Date C	ardholder's signature			
□ BANK TRANSFER				
Account holder				
EUROPA GROUP - BNP Paribas CENTRE	D'AFFAIRES			
SUD-OUEST Bank references				
IBAN : FR76 3000 4024 9700 0114 4773 477	7			
SWIFT CODE: BNPAFRPPXXX				
Invoicing address (if different from shipping)				
Institution				
PO number				
Address				
City				
State				
Postal Code Country				
Tel				
VAT number*				
*Mandatory for UE countries				

PLEASE EMAIL YOUR ORDER TO:

reprint@eurointervention.org





