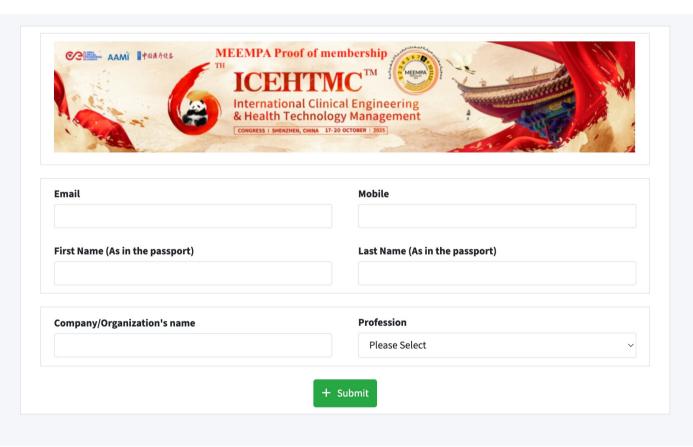
# **Registration instructions**

6th ICEHTMC Congress on Clinical Engineering & Health Technology Management



### Generate your membership certificate

https://meempa.org.sa/platform/gcea 2025/



## You receive an email of registration

<b>←</b>		1 of 225	5	< ;	<b>→</b>	■ ▼
	تم استلام بیاناتك بنجاح   Your Registration is successful → المتعالم المتعادة المت				ð	Ø
	noreply@meempa.org.sa 3:43 PM (0 minutes	ago)	☆	<b>(2)</b>	$\leftarrow$	:

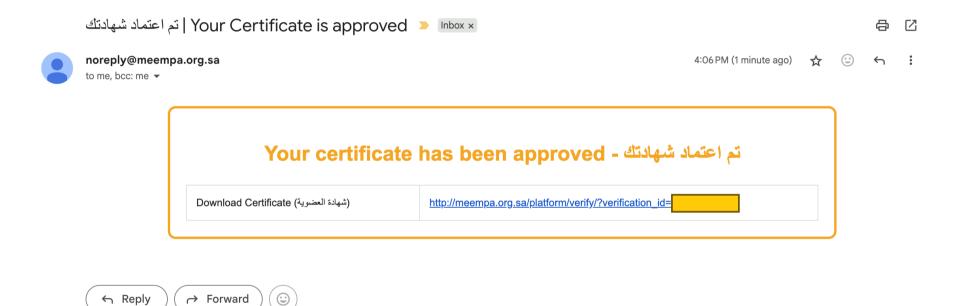
شكراً لتسجيلكم - Thank You						
Field (الحقّل)	Details (التغاصيل)					
Name (الاسم)						
Mobile (الجوال)						
(البريد الإلكتروني) Email						
(التاريخ والوقت) Fime Stamp						
Organization (الجهة)						
Profession (المهنة)						
Oownload Certificate (شهادة العضوية)	http://meempa.org.sa/platform/verify/?verification_id=					

### Certificate generation in progress

4

NOT APPROVED YET

#### Certificate after approval



#### Certificate



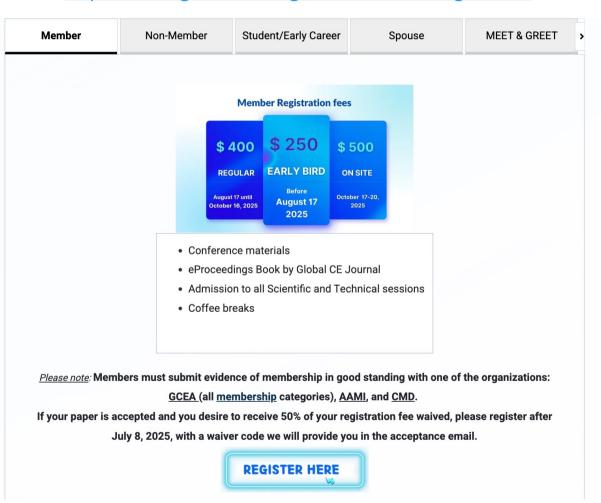
#### This is to Certify that

is a beneficiary member at MEEMPA, and is given this certificate to apply for 6th ICEHTMC



#### Accessing GCEA site

https://www.globalcea.org/icehtmc-2025-registration



#### Filling the form

For Membership Organization\* → choose GCEA MO

For attachment  $\rightarrow$  attach your MEEMPA certificate



This is to Certify that

is a beneficiary member at MEEMPA, and is given this certificate to apply for 6th ICEHTMC





#### **Member Registration Form**

Please note that Members must submit evidence of membership in good standing

with one of the organizations: GCEA (all membership categories), AAMI, and CMD. First name 1 Please complete this required field. Please complete this required field. Middle or initials name Last name \* Please complete this required field. Company/Organization's name \* Please add here your affiliation Please complete this required field. Profession \* Country Saudi Arabia Please Select Please complete this required field. Membership Organization \* GCEA MO

Provide evidence of membership with GCEA, AAMI, CMD. Evidence accepted includes a copy of the membership card, an official letter, or a

Please provide evidence of membership in good standing with the Organization \*

choose files No file chosen

#### Filling the form

Agree to the terms, then proceed to payment at your discount fees

#### Please provide evidence of membership in good standing with the Organization \*

Provide evidence of membership with GCEA, AAMI, CMD. Evidence accepted includes a copy of the membership card, an official letter, or a screenshot from the organization's website.

Choose files No file chosen

✓ I agree to be photographed during the Congress \*

Global Clinical Engineering Alliance is committed to protecting and respecting your privacy, and we'll only use your personal information to administer your account and to provide the products and services you requested from us. From time to time, we would like to contact you about our products and services, as well as other content that may be of interest to you. If you consent to us contacting you for this purpose, please tick below to say how you would like us to contact you:

✓ I agree to receive other communications from Global Clinical Engineering Alliance. \*

In order to provide you the content requested, we need to store and process your personal data. If you consent to us storing your personal data for this purpose, please tick the checkbox below.

✓ I agree to allow Global Clinical Engineering Alliance to store and process my personal data. \*

You can unsubscribe from these communications at any time. For more information on how to unsubscribe, our privacy practices, and how we are committed to protecting and respecting your privacy, please review our Privacy Policy.

**Continue to payment** 

# See you in Shenzen © 17<sup>th</sup> October 2025



# Thank you

ممثل المملكة في التحالف الدولي GCEA

