

Registration Form

Monday 22nd & Tuesday 23rd November

Full Name:

Job Title:

Hospital:

Address:

Telephone:

Email:

Yes I wish to request accommodation at the London Hilton Metropole Hotel Please tick and complete accommodation form

THE REGISTRATION FEE INCLUDES THE FOLLOWING:

- Admission to all Scientific Sessions
- Admission to the Exhibition
- Use of the Internet Café
- Refreshments and Lunch
- All materials relating to the Conference
- Ticket to the Gala Dinner on Monday 22 November 2010 (for those paying for 2 day registration)

	Registration before Friday 24 September	Please Tick	Registration after Friday 24 September	Please Tick
Two Day Registration				
Consultant	£295.00		£395.00	
Jnr Medical and Allied Professionals	£145.00		£245.00	
One Day Registration				
Consultant	£180.00		£225.00	
Jnr Medical and Allied Professionals	£90.00		£150.00	

Currency: GBP Sterling

TO BE COMPLETED BY ONE DAY REGISTRANTS ONLY - I will be attending the following day:

Please Tick Box: **Monday 22 November** **Tuesday 23 November**

PAYMENT DETAILS:

Credit Card: VISA / MASTERCARD / MAESTRO *Please circle*

Name on card:

Card Number:

Expiry Date: Valid From:

Issue No: Security No:

(last 3 digits on signature strip on back of card)

Registration can also be paid by cheque to Millbrook Medical Conferences Ltd or registration can be done online at www.EuropeAF.com

Please complete and return to Millbrook Medical Conferences Limited

Fax to +44 (0) 1455 550098 or post to:

Millbrook Medical Conferences Ltd, Suite 3, Elizabethan House, Leicester Road, Lutterworth, Leicestershire LE17 4NJ