

The symposium registration fee includes: Access to all symposium sessions • Access to poster and exhibition areas • Abstract book available at the symposium and symposium documentation • Lunch and mid-session refreshments as scheduled in the preliminary program • Drinks reception on Sunday 11 October 2009

## Registration Details

Please register me for the following delegate option:

**Early Delegate Fee**  
*(for all registrations received before 1 September 2009)*  
**US\$695.00**

**Late Delegate**  
*(for all registrations received on or after 1 September 2009)*  
**US\$795.00**

**Student Delegate\***  
**US\$199.00**  
*\*Student registrations must be accompanied by a signed letter from your head of department attesting to your student status*

**Optional conference dinner at SeaWorld \$75**

**Short Courses**  
 **Course 1 @ US\$300**  
 **Course 2 @ US\$150**  
 **Course 3 @ US\$150**  
 **Course 4 @ US\$300**

Registration fees are payable in advance of the conference.

## Delegate Details

Title: \_\_\_\_\_ First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address: \_\_\_\_\_

Job title: \_\_\_\_\_

Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

County/State: \_\_\_\_\_

Postcode/Zipcode: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Special access or dietary requirements: \_\_\_\_\_

Abstract reference number: \_\_\_\_\_

- Yes - please send me information on sponsorship opportunities
- Please tick this box if you do not wish your name and affiliation to be included in the list of attendees given to delegates at the meeting.
- Please tick this box if you do wish your email address to be given out to delegates

## Payment Details

**Please send me an invoice**

**Please charge my credit/debit card:**

Card type: \_\_\_\_\_

Card number: \_\_\_\_\_

Start date: \_\_\_\_ / \_\_\_\_ Expiry date: \_\_\_\_ / \_\_\_\_

Issue number: \_\_\_\_\_

## Cardholder details

Tick if same as Delegate details

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Email address: \_\_\_\_\_

Job title: \_\_\_\_\_

Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

County/State: \_\_\_\_\_

Postcode/Zipcode: \_\_\_\_\_

Country: \_\_\_\_\_

## Declaration

I have read and agree to abide by the payment and cancellation terms, and I understand that this form confirms my conference bookings. I accept that from now on charges will be imposed on for cancelled registrations, and that up to the full registration fee will be payable if I am unable to attend the conference for any reason.

Please tick this box and sign and date the form to confirm you read and understand the above listed terms and conditions.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

### Cancellations

Substitutions may be made at any time but please advise the Symposium Secretariat of a change of name. If you find it necessary to cancel the registration completely, please notify the Symposium Secretariat immediately. Provided written notice is received by 31 August 2009, a full refund will be given less a 10% administration charge. Provided written notice is received 14 September 2009, a 50% refund will be given. It is regretted for registrations cancelled after 14 September 2009, or for no-shows at the conference, the full fee (100% cancellation charges) will be payable.

In the unlikely event that Elsevier shall deem it necessary to cancel the conference, all pre-paid registration fees will be reimbursed. Elsevier shall not be liable for reimbursing the cost of travel or accommodation arrangements made by individual delegates.

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