

BioPhysics Workshop

12 July 2011

St George's Hotel - Pretoria

REGISTRATION FORM



Send to: Please register by Fax (012) 662 3724 / or email: registration@carlamani.co.za

PLEASE PRINT CLEARLY IN BLOCK LETTERS

Company Name		
Dept /Division		
Title	First Names	Surname
Pls specify any dietary requirements		

Total Number of persons registered on this form to attend the course		Total amount at R250.00 per person	R
--	--	------------------------------------	---

CONTACT DETAILS for INVOICE

Tel no: (w)		Mobile:	
Fax no:		E-mail:	
Company postal address			
Company VAT number		Postal code:	

PAYMENT

Bank: Standard Bank	Account name: South African Institute of Physics Account number: 202 815 382 Swift: SBZA ZA JJ	Branch: Lynnwood Ridge Branch code: 01244515
Signature of person responsible for payment of Account		
Enquiries can be made to : carla@carlamani.co.za or registration@carlamani.co.za		

Please Note: All delegates have to register and pay prior to the date of the workshop. An invoice will be processed within 2 working days upon receipt on your registration form.

CANCELLATION POLICY: The full fee is payable if cancelled after the closing date. Please ensure that you receive a cancellation fax with a cancellation number. Delegates booking and not attending will be liable for the full fee. Substitute delegates are welcome but names must be advised on a company/department letterhead.

ADMISSION CONDITIONS: Payment is due on receipt of the invoice and must be made via EFT into the given account. A copy of the proof of payment must be faxed to the organisers (fax: 012 662-3724). The organizers may refuse admission where evidence of payment cannot be shown. Delegates will be registered on a "first come, first serve" basis.

Organised by Carlamani Conferences & Events (Pty) Ltd

Enquiries for content of Workshop: Dr RW Sparrow rsparrow@csir.co.za Tel 012 - 841 4149
(Chairperson) or Dr MS Myer myer.msm@gmail.com Tel 012- 841 2356