

REGISTRATION FORM — - "ASSESSING CORONARY HEART DISEASE RISKS WITH PUFA BIOMARKERS"

Sunday 27 June 2004 ● The Brighton Centre, Brighton, UK

Please complete in BLOCK CAPITALS using one form per delegate. Photocopies are accepted.
Bookings will be taken on a first come, first served basis.

CONTACT DETAILS:

TITLE: (Dr, Prof, Miss, Mr, Ms, Other)..... **MALE:** **FEMALE:**

FIRST NAME:..... LAST NAME/SURNAME:.....

ORGANISATION:.....

ADDRESS:.....

.....

CITY:..... COUNTRY:..... ZIP/POSTCODE:.....

BUSINESS TELEPHONE NUMBER:..... FAX NUMBER:.....

EMAIL:.....

REGISTRATION FEE:

All prices are in (GBP) pounds sterling and include entry into the workshop only, lunch and delegate pack.	AMOUNT (GBP)
I wish to attend the workshop entitled "Assessing Coronary Heart Disease Risks With PUFA Biomarkers" As part of your main ISSFAL registration (GBP 80) To attend the workshop only (GBP 100)	

Please advise here of any special dietary requirements:

SPECIAL NEEDS: (Please indicate any special needs here)

.....

METHOD OF PAYMENT: (Choose one option only)

All payments must be in GBP (pounds sterling) in the form of a bank draft drawn on a UK bank, bank transfer or credit card.

1/ **BY CHEQUE:** (please make cheques payable to "ISSFAL 2004 Limited") **TOTAL GBP:**

2/ **BY CREDIT CARD:** (please debit my Mastercard/American Express or Visa – delete as appropriate) **TOTAL GBP:**.....

Card Number:..... Expiry Date:.....

Card in the name of:..... Signature:.....

3/ **BY INVOICE:** (BOOKINGS WILL NOT BE CONFIRMED UNTIL PAYMENT HAS BEEN RECEIVED)

Name of organisation:..... Contact name for invoice:.....

Invoice address:.....

..... Postcode:..... Purchase Order No:.....

4/ **BY BANK TRANSFER:** (transfers must be sent to)

Bank name: NatWest Account No: 54509211 Sort Code: 60-21-27
Address: Tiverton Branch. 11 Fore Street, Tiverton, Devon, EX16 6LW
Quoting reference "ISSFAL04" and delegate's name. All transaction charges to be settled by the delegate.
Please fax the organisers a copy of the transfer details along with a copy your completed registration form.

PLEASE SEND YOUR COMPLETED FORM TO:

ISSFAL 2004 Secretariat
Wheldon Events & Conferences, 49a Anchor Road, Aldridge, West Midlands WS9 8PT UK
Tel: +44 (0)1922 457 984 Fax: +44 (0)1922 455 238
Email: natashadougall@wheldonevents.freeserve.co.uk Web: www.wheldonevents.co.uk/issfal