



DELEGATE BOOKING FORM

EVENT

Title: Challenges of In-Flight Safety		Ref: ATS41109
Date: 4 th November 2009	Venue: TBC	City / Country: Tampa FL, USA

DELEGATE

Name:	E-mail:
Position:	Address:
Company:	
Tel:	Postcode / Zip Code:
Fax:	Country:

BILLING ADDRESS (if different from above)

Name on Credit Card:	Postcode / Zip Code:
Billing Address:	Country:

CREDIT CARD / DEBIT CARD PAYMENT

Delegate Fee: US\$99	Date: _____
Credit & Debit Cards (please tick one):	Signature: _____
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS (Charge GBP70)	
<input type="checkbox"/> MAESTRO (non UK issued) <input type="checkbox"/> VISA ELECTRON (non UK issued)	
<input type="checkbox"/> VISA ELECTRON (UK issued) <input type="checkbox"/> MASTERCARD DEBIT (UK issued)	
<input type="checkbox"/> VISA DEBIT (UK issued) <input type="checkbox"/> MAESTRO (UK issued – Charge GBP70)	
<input type="checkbox"/> SOLO (Charge GBP70)	
Card Number: _____	
Name as it appears on Card: _____	
Valid from (if on card): _____ Expires End Date: _____	
Security Number: _____ Issue Number (UK cards only): _____	

The delegate fee must be paid in full before the date of the event. Substitutions for delegate bookings are allowed at any time and cancellations that are received in writing up to 30 days prior to the date of the event will be refunded (-10% administration fee). No cancellations and requests for refunds can be accepted in the final 30 days prior to a conference or seminar. For more details on terms & conditions, please visit www.aeropodium.com.

Please sign and date this document and return it to Aeropodium

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