



DELEGATE BOOKING FORM

EVENT

Title: Business Aviation in Latin America: A Vision for the Future		Ref: BALA2009
Date: 15 th August 2009	Venue: LABACE	City / Country: Sao Paulo, Brazil

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:
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CREDIT CARD / DEBIT CARD PAYMENT

<p>Delegate Fee:US\$250 <input type="checkbox"/> LABACE Exhibitors:US\$200 <input type="checkbox"/></p> <p>CEPTA Members:US\$200 <input type="checkbox"/> GAMA Members:US\$200 <input type="checkbox"/></p> <p>Credit & Debit Cards (please tick one):</p> <p><input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS (Charge GBP160/130)</p> <p><input type="checkbox"/> MAESTRO (non UK issued) <input type="checkbox"/> VISA ELECTRON (non UK issued)</p> <p><input type="checkbox"/> VISA ELECTRON (UK issued) <input type="checkbox"/> MASTERCARD DEBIT (UK issued)</p> <p><input type="checkbox"/> VISA DEBIT (UK issued) <input type="checkbox"/> MAESTRO (UK issued – Charge GBP160/130)</p> <p><input type="checkbox"/> SOLO (Charge GBP160/130)</p> <p>Card Number: _____</p> <p>Name as it appears on Card: _____</p> <p>Valid from (if on card): _____ Expires End Date: _____</p> <p>Security Number: _____ Issue Number (UK cards only): _____</p>	<p>Date: _____</p> <p>Signature: _____</p>
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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

FAX: +44 20 8711 5697

E-MAIL: register@aeropodium.com

Aeropodium, #7, 85 Sunny Gardens Road, London NW4 1SH, United Kingdom

Tel: +44 20 8202 1389 – Fax: +44 20 8711 5697 – Email: mail@aeropodium.com - Web: www.aeropodium.com