



THE IMPT 28th SCIENTIFIC CONGRESS
GLASGOW, UK
6th-8th SEPTEMBER 2017
CALEDONIAN UNIVERSITY



PLEASE USE THIS FORM TO BOOK

*1 form for each delegate in your party

YOUR DETAILS please complete using black ink in BLOCK CAPITALS

Mr/Mrs/Ms/Miss/Dr First Name _____ Surname _____

Institution (Unit/Hospital) _____

Address _____

City _____ County/Area _____ Postcode _____

Phone _____ Email _____

Country _____ Membership No. (if applicable) _____

MEMBERS RATES: Please tick package selected

Congress Package		Price	Package Selected			
1	FULL PACKAGE 3 nights accommodation & breakfast	£560	Full package 3 nights <input type="checkbox"/>			
2	FULL PACKAGE MINUS ACCOMMODATION	£455	Day Delegate 3 days <input type="checkbox"/>			
3	DAY RATE	£110	Day Delegate 1 day <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>Wed</td> <td>Thurs</td> <td>Fri</td> </tr> </table>	Wed	Thurs	Fri
Wed	Thurs	Fri				
Optional Congress Extras						
	Civic Reception on 6 th September Notification if Attending	FREE	<input type="checkbox"/>			
Non Member Tariff						
	Please add the "Non-Member Tariff" to the package already selected	£100	<input type="checkbox"/>			

SPECIAL REQUIREMENTS: Please indicate below any special dietary requirements or any physical disability to be considered.

	Price
Congress Package Selected	£
Non-Member Tariff	£
Total enclosed with Registration Form	£

PAYMENT

Cheques must be in £ sterling payable through a UK Clearing Bank and made payable to:
IMPT Number Two Account

Alternatively, PayPal payments can be made direct via the IMPT website (4% handling charge will apply).

If you wish to make a payment using electronic bank transferral direct to our account, the details are as follows:

Account Name: **Number 2 Account** Sort Code: **40-17-16** Account No: **51325566**

International Bank Account Number: **GB02MIDL40171651325566**

Bank Identifier Code: **MIDLGB2103S**

Bank Address: **HSBC Bank, 94 East Street, Chichester, West Sussex, PO19 1HD, England.**

IMPORTANT: Please include your name as a reference with all direct electronic payments.

If electronic transfer is your choice of payment, please provide a receipt from your bank attached to your Registration form to indicate payment has been sent to the IMPT.

PLEASE NOTE FINAL PAYMENT DATE OF 26th July 2017

PLEASE SEND COMPLETED BOOKING FORM & ACCOMPANYING PAYMENT TO:

Mr Richard Eggleton FIMPT
Treasurer of the IMPT, Institute of Maxillofacial Prosthetists and Technologists
108 Applegarth Avenue, Guildford, Surrey,
GU2 8LR, ENGLAND, UK

Email: reggleton@nhs.net

Mobile: +44(0)7740 147786 Telephone: Work +44(0)1483 406680