

BOOKING FORM

Society for the Medieval Mediterranean Conference, 9th – 12th July 2009

Please register before **15 June 2009***. Conference fee (all participants, non-refundable) inclusive of three light lunches, all coffees, teas.

*Bookings made from **16 June 2009** will be subject to a £15 surcharge.

Society member	£50	<input type="checkbox"/>
Society student/senior member (student status must be verified by university ID and accompany the application)	£45	<input type="checkbox"/>
Non member	£70	<input type="checkbox"/>
Student/senior non member (student status must be verified by university ID and accompany application)	£60	<input type="checkbox"/>
Day Pass Society member (Per Day)	£20	<input type="checkbox"/>
Day Pass Non member (Per Day)	£25	<input type="checkbox"/>
Conference dinner, Saturday 11 th July (3 Course Dinner. Alcohol or soft drinks are not included)	£30	<input type="checkbox"/>
**Total amount payable (registration fee plus conference dinner if required)	£	

Please state special dietary requirements: _____

Title and name (block capitals)	
Affiliation	
Address (for correspondence)	
Telephone:	
Mobile:	
Email:	

Please return this form with your payment to:

**Miss Laura Scrivens, Institute of Arab and Islamic Studies, University of Exeter,
Stocker Road, Exeter. EX4 4ND England (Fax +44 (0) 1392 264035)**

Please tick the box to confirm that you have read and understood our terms and conditions policy:

Payment:

Payments can be made by credit card, but are subject to a £4.50 handling fee. Fax credit card details and booking form to +44 (0) 1392 264035. **Cheques should be made out in pounds sterling, payable to: **The University of Exeter.**

I enclose cheque number.....

CREDIT/DEBIT CARD AUTHORISATION ONLY

Please note that the University would prefer payment by UK credit card (MasterCard or Visa) or UK debit card (Maestro, Solo, Connect, Electron etc). Card payments over £1000.00 may be subject to security questions by the card user.

Card Holders Name _____

Type of Card: VISA MASTERCARD OTHER (Please Specify)

Card Number

Start Date _____ Expiry Date _____ Debit Card Issue No. (If applicable) _____

Security Number (last 3 digits of number on signature strip)

Cardholders Address _____

Postcode

I authorise the University of Exeter to charge my credit/debit card with the amount of £ .

Signature of card holder _____ Date: _____

Cardholder's Telephone No. _____