COLA 2009
10th Annual Conference on Laser Ablation
22-27 November 2009 • http://www.cola2009.org/

REGISTRATION

Please write (in CAPITAL LETTERS) your name and details, as you would like them to appear on your name badge.

Salutatory Title: Surname:

First Name:

Organisation:

Job Title:

Postal Address:

Post/Zip Code: Country:

Telephone: Fax:

Email:

Paper Submission ID *(if any and limit to 2 papers per registration)*:

CONFERENCE REGISTRATION FEE

PAYMENT MUST ACCOMPANY THIS CONFERENCE REGISTRATION

Please tick :	By 4 Oct 2009	After 4 Oct 2009
Standard*	☐ S$950	☐ S$1050
Student **	☐ S$500	☐ S$600
Excursion	☐ S$50	
Conference Dinner	☐ S$100	
Post-Conference Tour	☐ S$50	

** Includes daily coffee breaks and lunches, attendance to all technical sessions, conference package, conference journal, welcome reception, excursion, conference dinner and post-conference tour.*

*** Includes daily coffee breaks and lunches, attendance to all technical session, conference package and welcome reception. Student rate registration does not include the journal, excursion, conference dinner and post-conference tour. Tickets for the excursion, conference dinner and post-conference tour will have to be purchased separately.* ***Student Verification Letter from School or Copy of Student Pass is required.***

MODE OF PAYMENT

Payment must be made in **SGD** by local cheque, bank draft, telegraphic transfer or credit card (Visa, Mastercard or American Express) and must be received prior to commencement of conference.

☐ **Payment by Credit Card**

☐ **Payment by Bank Draft [**Payable to "**National University of Singapore**"]

☐ **Payment by Telegraphic Transfer**

Please quote conference reference on all bank transactions: COLA 2009

PAYMENT BY CREDIT CARD

Only following cards accepted:

☐ **VISA** ☐ **MASTERCARD** ☐ **AMEX**

Credit Card No:

Expiry Date: __ __ / __ __ __ __ *(mm / yyyy)*

Cardholder's Name:

I hereby authorize COLA 2009 Secretariat to charge my card in the amount of:

SGD: _____

Signature of Cardholder:

Date:

PAYMENT BY TELEGRAPHIC TRANSFER (SGD)

All banking charges should be borne by registrant. Kindly attach a copy of your bank advice slip with this registration form.

Account Name : National University of Singapore
Bank Account No. : 032-000313-3
Bank Name : DBS Bank Ltd, Singapore
Branch : DBS Great World City
Swift Code : DBSSSGSG
Address of Bank : 6 Shenton Way,DBS Building Singapore 068809
Reference : **COLA 2009**

DIETARY PREFERENCE

Chinese Menu with no pork/lard will be served. If you have any special dietary preference, kindly indicate accordingly:

_____

CONTACT INFORMATION

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