

**CIRSE 2010 SOCIAL PROGRAMMES
BOOKING FORM**

Please fill in this form and return via FAX or EMAIL to:

Kuoni Destination Management SL

Pau Claris 138 1^a 3^a

08 009 BARCELONA SPAIN

Tel: +34 93 505 25 10 **Fax: +34 93 488 37 03**

Email: cirse2010@ch.kuoni.com

Personal Details: (Please type or write in BLOCK letters)

Title: Prof. Dr. Mr. Mrs. Ms.

Last Name: _____

First Name: _____

Company / Institute / Hospital: _____

Department: _____

Address: _____

ZIP Code: _____ City: _____ Country: _____

Tel: _____ Fax: _____

Email: _____

CIRSE FOUNDATION PARTY

A maximum of 4 tickets can be booked by 1 person.

There is a possibility to book a whole table (10 seats) for EUR 1.500,-

| No. of Tickets | | Date | Time | Rate/Person |
|----------------|-------------------------|--------------|-------|-------------|
| _____ | Foundation Party | Oct. 5, 2010 | 19:30 | € 85.00 |
| _____ | Entire table (10 seats) | Oct. 5, 2010 | 19:30 | € 1,500 |

LAST NAME: _____ FIRST NAME: _____

PAYMENT

Full prepayment is required for the foundation party & tours. All payments are to be made in Euro (€). Please indicate your preferred method of payment:

1.) Payment by Credit Card: Master Card Visa

I herewith authorize Kuoni Destination Management to charge the following credit card for all services booked on this form:

Credit Card Number: _____

Expiry Date: _____ ^{1.)}Card Validation Code: _____
(Month/Year)

Name of Card Holder: _____

^{1.)}Card Validation Code: _____

^{1.)} Card Validation Code is 3 last digits of the series number printed on the back of the credit card.

2.) Payment by Bank Transfer: Bank Transfer

Kuoni Destination Management will send you a confirmation of all booked services and the corresponding amount due. Upon receipt of the confirmation letter, a bank transfer has to be made to the following account:

**Kuoni Destination Management, LA CAIXA CIUDAD DE BARCELONA
Address: AV.CIUDAD DE BARCELONA, 110 28007, MADRID, SPAIN
IBAN Code: ES68 2100 2249 7502 0027 0581, SWIFT/BIC Code: CAIXESBBXXX**

Please instruct your bank to carry out the transaction "**free of all bank charges for the recipient**". Bank fees will be charged to the participant. It is important to mention: "**CIRSE 2010 + Name of the Participant and company**" on every bank transfer in order for us to allocate your payment.

CANCELLATION POLICY**Foundation Party**

No refund after booking, 100% cancellation fee.

Date: _____ Signature: _____