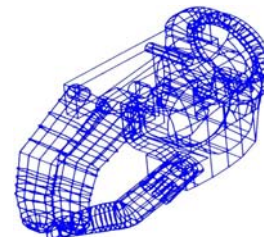




International Society for Prosthetics and Orthotics
United Kingdom National Member Society

Trent
International
Prosthetic
Symposium

2009



EXHIBITOR REGISTRATION FORM

Company Name:	
Address:	
Contact Name:	
Telephone:	E-mail:
<p>Your company details and logo will be published in the conference compendium. Please e-mail your company logo to info@ispo.org.uk by Friday 27th March 2009. If you do not wish your company's details to appear in the compendium please tick this box. <input type="checkbox"/></p>	

Exhibition Space		
	No.	Total £
Exhibition Space (3m x 2m) @ £300 per space		
Table (2m x 600mm) - FOC		FOC
Sub Total (A)		
Please indicate the names of the representatives who will attend your stand. You are allowed two representatives per stand space. Additional representatives should register as full conference delegates.		

Advertisements in Symposium Compendium		
	No.	Total £
Full Page A4, inside front cover, colour @ £150		
Full Page A4, inside back cover, colour @ £150		
Full page A4, back cover, colour @ £150		
Full page A4, inside, black & white @ £100		
Sub Total (B)		
All adverts should be e-mailed in pdf format to info@ispo.org.uk to arrive no later than Friday 27th March 2009 .		

Social Events		
	No.	Total
Monday 18 th May Barbeque and Cocktail Reception (£25 per ticket)		
Tuesday 19 th May Conference Dinner (£35 per ticket)		
Sub Total (C)		

Delegate Folder Inserts	
Please tick this box if you wish to provide inserts for the delegate folders.	<input type="checkbox"/>
<p>Items should be no larger than A4 size and collectively no more than 3mm thick and should be delivered to ISPO UK NMS Secretariat, c/o 24 Manse Road, Bearsden, Glasgow, G63 3YL clearly marked "TIPS 2009 Delegate Inserts" to arrive no later than Friday 8th May 2009.</p>	

Manufacturers' Workshops	
Please tick this box if you are interested in participating in a workshop.	<input type="checkbox"/>
A member of the Organising Committee will contact you to discuss further.	

Sponsorship Opportunities	
Please tick the appropriate box (es) if you are interested in sponsoring	
Guest speaker (s)	<input type="checkbox"/>
Monday 18th May BBQ & Cocktail Reception	<input type="checkbox"/>
Tuesday 19th May Conference Dinner & Wine	<input type="checkbox"/>
Conference bag sponsorship donation	<input type="checkbox"/>
A member of the Organising Committee will contact you to discuss further.	

Payment	
Payment must be made at time of registration.	
Total Amount Payable (A + B + C)	£
Method of Payment (please choose one option)	
By cheque made payable to ISPO UK NMS .	<input type="checkbox"/>
By BACS transfer to: The Royal Bank of Scotland plc, Dundee Ninewells Hospital Branch, Ninewells Hospital, Dundee, DD1 9SY. Sort Code: 83-28-39 Account No: 00146801 A BACS remittance advice should accompany your registration form.	<input type="checkbox"/>
By international bank transfer to: The Royal Bank of Scotland plc, Dundee Ninewells Hospital Branch, Ninewells Hospital, Dundee, DD1 9SY. Beneficiary: ISPO UK NMS IBAN No: GB29RBOS83283900146801 Swift Code: RBOSGB2L	<input type="checkbox"/>

<p>Please forward your completed registration form, together with payment, to:</p> <p>Irene Cameron, ISPO UK NMS Secretariat, PO Box 2781, Glasgow, G61 3Y1</p> <p>Tel/Fax: ++ 44 (0) 141 560 4092 E-mail: info@ispo.org.uk</p> <p>Full conference and exhibition details are available on the ISPO UK NMS website at www.ispo.org.uk</p>
