



REGISTRATION FORM

To register please complete and return the registration form below:

Fax to: +44 (0)871 242 1438

Mail to: Kay Russell, *Neuropharmacology Conference*
 1 Croft Cottages, Burcot, Abingdon,
 OXON OX14 3DG, UK

Please register me for Neuropeptides

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- Please tick this box if you do wish your email address to be given out to delegates of this conference, in the knowledge that it may be used by them for future 3rd party mailings.

Presenters should provide their abstract reference number in order to ensure that their material is included in the final program and abstract book: [e.g. NEUR0001] Ref: _____

- Please send me information on exhibition and sponsorship opportunities at the congress

CONFERENCE REGISTRATION

A reduced registration rate is available for delegates booking on or before August 14, 2009.

- Early Booking Industrial Delegate: US\$895
- Early Booking Academic Delegate: US\$595
- Industrial Delegate (booking after August 14, 2009): US\$995
- Academic Delegate¹ (booking after August 14, 2009): US\$695
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Declaration *(Please note that unsigned forms cannot be accepted)*

I have read and agree to abide by the payment and cancellation terms, and I understand that this form confirms my conference booking. I accept that from now on charges will be imposed for cancelled registrations, and that up to the full registration fee will be payable if I am unable to attend the conference for any reason.

Signed: _____ Date: _____

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