



**British Society for Haematology
50th Annual Scientific Meeting**

THE EICC, EDINBURGH, 19th – 21st April 2010

2010

REGISTRATION APPLICATION

REGISTRATION DEADLINE - THURSDAY 1ST APRIL 2010

Return completed forms to:

Sharon Forster, BSH Conference Secretariat

Strawberry Cottage, The Old Station, Nidd, Harrogate, North Yorkshire, HG3 3BG

Tel: +44 (0)1423 772889

Fax: +44 (0)1423 772203

Email: sharon.forster@bshconferences.co.uk

You will be sent written confirmation of your registration through the post within 5 working days of receipt of your booking

Personal Details

Title (please tick box)	First Name	Family Name/Surname	
Prof <input type="checkbox"/> Mr <input type="checkbox"/> Dr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>			
Department			
Hospital/Organisation			
Address			
Address			
Town/City			
Postcode			
Country			
E-Mail Address			
Telephone Number		Fax Number	

I do NOT wish my name and contact details to appear in the List of Participants or to be passed to Sponsors and/or Exhibitors

Please tick the box if you require disabled access to the EICC

Please indicate below if you are a member or non-member of the British Society for Haematology

Member Non-Member

Speciality (please tick)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Clinical Scientist | <input type="checkbox"/> IBMS | <input type="checkbox"/> Nurse Specialist |
| <input type="checkbox"/> Non tenured haematologist | <input type="checkbox"/> Scientist | <input type="checkbox"/> SpR/Junior doctor in training | <input type="checkbox"/> From DGH |

Dietary Requirements

Please specify any dietary requirements.....

Concessionary Fees

If you are registering as a Non-Tenured Haematologist (Junior Doctor, SpR, Doctor in training, Laboratory Assistant, Pharmacist etc.)/Scientist, a Biomedical Scientist or a Nurse Specialist, your head of department must sign below to confirm your status:

Name (please print)_____

Professional position held_____

Signature_____ Date_____

