

Registration Form

**NIWA UV Radiation and its Effects Workshop
Cophthorne Hotel, Queenstown, New Zealand
7-9 April 2010**

Contact Details			
Title:	Initials:	First Name:	
Last Name:			
Affiliation:			
Address:			
Telephone:		Fax:	
E-mail:			
Do you want to make a presentation ("Oral" or "Poster")			
Title of Presentation:			
	No of occupants	Arrival Date	Departure Date
Hotel Room			
Conference rates (up to 3 nights)	Single occupancy: \$120/night, including breakfast Shared occupancy: \$90/night, including breakfast		
Extra nights	\$135 for room +\$15per person for breakfast		
Total Cost for Room:			
Payment Details			
Registration: If staying at Cophthorne: Student: \$100, others \$160 (\$200 after 31/12/09) If staying elsewhere, or reserving independently: Add \$100			
Registration Fee:			\$
Room Costs (unless paying at check out):			\$
Conference Dinner at Skyline Restaurant(8/4/10, \$70 per person)			\$
Total Payment:			\$
Options for Payment are listed below:			
1. NIWA Staff. Please specify Project code to charge from:			
2. Send cheque to NIWA Lauder, PB 50061, Omakau, Central Otago (attn: G Strang)			
3. Request an invoice from above address.			
4. Debit against credit card (please fill in details below)			
Please circle payment Option: 1 2 3 4 (if 4, please fill in details below)			
Credit Card (Visa, or Mastercard)			
Cardholder name:			
Cardholder signature:			
Card Number:			
Expiry Date:			
Contact Address/phone during meeting (if known)			
Flight Arrival (if known)	Date:	Time:	Flight:
Flight Departure (if known)	Date:	Time:	Flight: