

Registration Form



**Chromatographic Society Spring Symposium & AGM
19th-20th May 2009, Merck, Sharp & Dohme, Hoddesdon, UK**

Current method development strategies in separation science

The following costs cover, full registration, and attendance at all sessions, lunches and exhibition;

Members of Chromatographic Society, BMSS, RSC C&E Group and EuSSS	£150 (incl. VAT)
Non Members	£200 (incl. VAT)
Retired	£60 (incl. VAT)
Unwaged	Free^{1,2}
Students	Free²

¹Unwaged must a verified member of the Chromatographic Society

²Please register your interest to attend and status through Meeting Makers by email to chromsoc@meetingmakers.co.uk

A limited number of student travel bursaries (only) are available; please contact Meeting Makers (chromsoc@meetingmakers.co.uk) for further details.

We are accepting both postal and electronic registrations as follows;

1. Postal; please complete the attached form and send with cheque, to Meeting Makers at the address shown below.
2. Electronic; please register on-line and pay with a credit card by visiting our website (www.chromsoc.com) and using the link on our Events Page.

Registration Form

Chromatographic Society Spring Symposium & AGM
19th-20th May 2009, Merck, Sharp & Dohme, Hoddesdon, UK

Current method development strategies in separation science

Cheques made payable to the "The Chromatographic Society" should be sent to:

The Chromatographic Society, Secretariat
c/o Meeting Makers
Jordanhill Campus, 76 Southbrae Drive, Glasgow, G13 1PP
Telephone: +44 (0)141 434 1500 Fax: +44 (0)141 434 1519
e-mail: chromsoc@meetingmakers.co.uk

Registration fees, include access to all scientific sessions and lunches.
Members rate also available to members of BMSS, RSC C&E Group and EuSSS affiliated societies.
A limited number of student travel bursaries are available – apply using e-mail address above).

I enclose a cheque for £ payable to the “The Chromatographic Society”

BMSS, RSC C&E Group or EuSSS membership number:

Name (block capitals)

.....

Address

.....

.....

Tel: **Fax:**

e-mail:

Alternatively:

PAYMENT BY CREDIT/DEBIT CARD

Please debit my Visa/MasterCard *for the amount above (*delete as applicable)*

Card Number / Expiry Date.....

Security digits (These are the last three numbers on the paper strip on the reverse of your credit card).....

Name and Address of Card Holder (if different from above)

Name (block capitals)

.....

Address

.....

.....

Signature of Cardholder: **Date**