## SOCIETY FOR EXPERIMENTAL BIOLOGY LTSN CENTRE FOR BIOSCIENCE

VIRTUAL LEARNING WORKSHOP Wednesday 10 April 2002 University of Wales Swansea

| Full Name:  |   |
|---|---|
|   |   |
| Department:   |   |
| Address:  |   |
|   |   |
| Telephone:  | Postcode:   |
| Email:  | Facsimile:  |
| Are you a speaker? YES NO   |   |
| PAYMENT DETAILS   Price   Total   | ACCOMMODATION:                                      |
| (£)   | Please book independently. For a list of hotels and |
| Registration: £50.00  | guesthouses in Swansea see:                         |
| Lunch (if required) £4.80   | http://www.swansea.gov.uk/tourism/                  |
| Dinner (if required) £9.30  | or http://www.smoothhound.co.uk/swansea.html        |
| TOTAL AMOUNT £  | or mep.//www.sineseimeana.ee.aryswansea.nemi        |
| SPECIAL REQUIREMENTS  | Any other dietary requirements please detail:       |
| Are you a Vegetarian?   |   |
| Do you eat Dairy products? YES NO   |   |
| Eggs? YES NO  |   |
| Fish? YES NO  |   |
| Do you have any food allergies? If yes give details   |   |
| Disabled Access   | Please tick (✓) if required                         |
| PAYMENT   | CREDIT CARD   |
|   | Total amount to debit £                             |
| You must send full payment with your booking.   | Please debit my:                                    |
| Payment <b>must</b> be in pounds sterling and cheques   | VISA MASTERCARD AMERICAN EXPRESS                    |
| must be drawn on a UK bank.   | Card Number   |
|   |   |
| <u>CHEQUE</u>   | Expiry Date: Issue Number:                          |
| I enclose a cheque for £  | For the total sum of my completed booking           |
| made payable to:  | I accept the booking conditions overleaf.           |
| THE SOCIETY FOR EXPERIMENTAL BIOLOGY  | Name of Candhaldan                                  |
| A receipt/confirmation of booking will be sent to all   | Name of Cardholder                                  |
| attending delegates.  | Signature of Cardholder                             |
| If you do not require your name to be included in the delegate list provided to Trade Exhibitors, Please tick ( ) box | Data  |
| ( )   | Date  |

Please send your completed form to:

SEB Education & Public Affairs Office, Biology Dept., Lancaster University, Lancaster LAI 4YQ Fax: 01524 594696

## PLEASE NOTE: BOOKINGS RECEIVED AFTER 22 MARCH WILL NOT BE PROCESSED

This workshop is part of the SEB's Education and Training Programme during its week-long Annual Main Meeting 2002. To view other sessions see http://www.sebiology.com/meetings/2002/Swansea/index.htm. If you would like to attend other sessions at the SEB Meeting you need to book this workshop using the SEB booking form available from the meetings website.