

11th International Circumpolar Remote Sensing Symposium
Scott Polar Research Institute, University of Cambridge, United Kingdom
20-24 September 2010

Registration Form

Please complete a separate registration form for each participant.

Title: Prof Dr Mrs Ms Miss Mr Rank _____ Other _____
Forename(s) _____ Surname _____

Organisation: _____

Address: _____

Address: _____

City: _____ Post/Zip code _____

Country: _____ E-mail: _____

Telephone (include international dialling code): _____

Conference registration (fee £150):

I will pay by credit card now

or I am sending a cheque*

** Cheques should be in pounds, payable to 'The University of Cambridge'. Post-dated cheques are not accepted*

Credit-card payments

Please complete the following information:

Type of card (e.g. Visa, Mastercard*): _____

Number of card: _____

Expiry date: _____ Month _____ / Year _____

Name on Card: _____

** We regret that we can not accept payment by American Express*

Note: We will also need to know the 3-digit security number on your credit card. However, we do not recommend including this information on this form. Instead, we will e-mail you to ask you for this information after we have received this form. PLEASE NOTE THAT WE NEED YOUR E-MAIL ADDRESS IN ORDER TO BE ABLE TO ACCEPT A CREDIT-CARD PAYMENT

Additional information

Please mention any special dietary, mobility or other concerns you would like us to know about:

When this form is complete, please either **fax** it to +44 1223 336549 or **scan** it and attach it to an e-mail to Mrs Maria Pearman, mbp25@cam.ac.uk

Postal address (for sending cheques): CRSS Office, Scott Polar Research Institute, Lensfield Road, Cambridge CB2 1ER, United Kingdom.