



# BRITISH ASSOCIATION OF PROSTHETISTS AND ORTHOTISTS

Annual Conference, DeVere Whites Hotel, Bolton 5 - 6 March 2010

## Exhibitor Registration Form





### General Information

- All Exhibitors should complete this form. Please use one form per person. Additional copies are available on request.
- Registration can only be made by completing all the relevant sections of this form. We cannot accept telephone bookings.
- Please use black ink and block capitals.

### Deadline dates and penalties

- Please post or fax your completed form, with payment, to **baPo Ltd** to arrive by 15 January 2010

### Financial Information

- Receipts for payment will be issued to each individual attendee.
- We will not accept this form without full payment of the grand total. Please do not include payment for anything else – Conference payment only.
- We will accept payment by credit card from any of the cards shown here    
- If your employer is meeting all or part of your conference costs:-
  - Please treat this form as a temporary invoice and pass it to your employer's finance department for cheque requisitioning.
  - We regret that baPo Ltd is unable to issue invoices to individual employers. Instead, we will issue a receipt to each individual attendee upon payment. It will be each attendee's responsibility to copy it to their employer.
  - Where an employer is meeting the costs of several attendees, payment for the accumulative total should accompany all registration forms. For example, for 6 attendees from one Company, return 6 forms with one Company cheque for the combined grand total.
  - If an employer is only meeting part of the grand total it is the responsibility of each attendee to meet the difference. For example, a Company cheque plus a personal cheque should be attached to this form. Please also attach a clear breakdown of the payment.

### YOUR PERSONAL DETAILS.

- Please give your name, discipline and employer as you would like them to appear on your exhibitor badge.

<b>Name</b>	Title	First Name	Surname
<b>Discipline</b>	Sales/Marketing Manager/Director, CEO, MD Other (please specify)		
<b>Employer</b>			
<b>Address for correspondence</b>	<b>Day time telephone no:</b>		
	<b>Email Address</b>		
	<b>BAPO Membership No. (if applicable)</b>		

**PLEASE TURN OVER FORM CONTINUED OVERLEAF**

Please complete the appropriate sections below. Day rate for Exhibitors available. Please contact BAPO Secretariat for information

### PART ONE: Exhibitor Registration

REGISTRATION FEES. Please choose ONE registration category and insert the correct fee in the Amount Payable column.		Amount Payable
<b>Category D</b> Access to Exhibition Programme only	The number of free places depends on your stand size. See Exhibition Information brochure at <a href="http://www.bapo.org">www.bapo.org</a>	
<b>Category E</b> Access to Exhibition Programme only	Additional Exhibitor Personnel Fee - £70 <i>(Includes VAT)</i>	
<b>Saturday Dinner / Dance</b>	No of tickets required <input type="text"/> (Tickets are non refundable) @ £30 per ticket (includes VAT)	

### PART TWO: Guest Registration – Friday 5 March Only

Guests may attend the Exhibition Programme on **Friday 5 March ONLY** from 18.00hrs to 21.00hrs

- A charge of **£30** per guest (incl. VAT) is due to cover catering costs (NB: no charge for children under 16yrs)
- Please give the name(s) of your guest(s)

Guest Name(s)	£30 per guest (children admitted free)
	£
	£
	£

### PART Three: Free Guest Registration – Saturday 6 March Only

5 free Exhibitor guest passes can be obtained from the BAPO registration desk on Saturday 6 March only. Exhibitor free guests will be admitted to the Exhibition hall only.  
**Please note catering will NOT be provided.**

<b>GRAND TOTAL</b> We cannot accept this form without full payment of the grand total. Cheques are payable to "baPo Ltd".	£
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**Declaration**

- I understand that cancellations received by baPo Ltd after 22 January 2009 are NOT eligible for refund and that exhibitor names are non-transferable after this date.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Credit card payment details.															
Type of card:															
Card No:															
Expires:			/												
This line for Maestro cards only.				Start Date				/	Issue No.		* CVV no.				
Signed										Date					

\*The CVV number can be found on the reverse of your card. If preferred this information can be given directly to the Secretariat via telephone.

Please return this form to: - BAPO Secretariat, Sir James Clark Building, Abbey Mill Business Centre, Paisley PA1 1TJ Scotland UK Tel: 0845 166 8490 Fax 0141 561 7218 [conference@bapo.com](mailto:conference@bapo.com)