

DELEGATE INFORMATION

Ms. Mrs. Mr. Dr. Prof.

Last Name (Family Name):
 First Name: (be sure to spell your name as it appears in your passport)
 Designation (MD, PhD, etc):
 Specialty area of work (Pediatric Oncology, Lab Research, etc):
 Institution/Hospital:
 Title:
 Department:
 Address:
 Zip/Postal Code: City: Country:
 Phone: + Fax: +
 Email: Other email:
 Secretary's name and contact details:

PLEASE PRINT ALL INFORMATION CLEARLY

HOTEL (ACCOMMODATION) INFORMATION

Please reserve a room at the Kervansaray hotel, Lara (Conference hotel)

Early reservation until January 7 th , 2009	Single room*	500 Euro + VAT
	Double room*	720 Euro + VAT
Late reservation as from January 8 th , 2009	Single room*	575 Euro + VAT
	Double room*	828 Euro + VAT

Accommodation rates are for a package of **4 nights*** and are all inclusive (excluding VAT).

Above rates will be charged for all stays EVEN shorter than 4 nights.

Check in for hotel is 21 March 2009, check out is 25 March 2009.

If you selected a double room, please provide the name(s) of the additional person(s):

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If you wish to expand your stay **at your own expense**, INCTR will ensure that your reservation is made accordingly but based *upon availability at the hotel*. INCTR negotiated rates for the 3 days prior to and after the conference are valid until January 7th, 2009.

Single room (all inclusive)/per night	125 Euro + VAT
Double room (all inclusive)/per night	185 Euro + VAT

Please indicate your arrival date (dd/mm/yy):/...../.....

your departure date (dd/mm/yy):/...../.....

- Guest rooms will be made available only to those delegates registered for the INCTR Annual Meeting.
- Delegates accompanied by individuals who are not registered for the Annual Meeting are responsible for the extra costs for double rooms.
- **All rooms must be pre-paid with a credit card. The INCTR secretariat will not process a request without a credit card number and expiration date, valid through the conference dates.**

Cancellation Policy

Notification of all cancellations must be made by email to Cedric Petit-Musin.

Cancellations between 90 - 120 days will be 75% refunded less the bank transfer expenses.

Cancellations between 45 - 90 days will be 50% refunded less the bank transfer expenses.

Cancellations between 0 - 45 days will not be refunded.

In the event of non arrival, we will automatically release the reservation and the payment will be nonrefundable.

TRAVEL INFORMATION

For transfers to and from the airport, we require your flight details

(all delegates should complete this information):

Arrival date (dd/mm/yy):/...../.....

Time: am pm - Airline: - Flight #:

Departure date (dd/mm/yy):/...../.....

Time: am pm - Airline: - Flight #:

City (airport) of your departure (arrival in Antalya Airport):

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Please note that transfers from the airport will only be organized as for March 21 through March 25.

All delegates/speakers who arrive before or after those dates will be responsible for their own transfers.

SPECIAL NEEDS

Please indicate in the space provided if you require any special assistance during the conference, or have any other special needs:

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PAYMENT INFORMATION

All INCTR Annual Meeting Delegates will be asked to pay a minimum registration fee to cover the costs of the Annual Meeting. **Because there is an upper limit to the number of participants, registration will be suspended at such time as this number is reached.**

Payments can be made by credit card only. No checks will be accepted.

Registration before December 1st, 2008

- Registration fee for delegates from developing countries 100.00 Euro
- Registration fee for delegates from Turkey 75.00 Euro
- Registration fee for delegates from Affluent Countries (US, Canada, Europe, Japan) 250.00 Euro
- Hotel accommodation Euro

Registration after December 1st, 2008

- Registration fee for delegates from developing countries 200.00 Euro
- Registration fee for delegates from Turkey 150.00 Euro
- Registration fee for delegates from affluent countries (US, Canada, Europe, Japan) 400.00 Euro
- Hotel accommodation Euro

Please charge my credit card for the total amount of: Euro

Indicate type of credit card: American Express Visa Mastercard Eurocard

Credit card number: - Expiration Date:

Three-digit code:

Name of card holder (as it appears on the credit card):

Signature:

Date (dd/mm/yy):/...../.....

Please note that no fees will be refunded after January 1st, 2009. Credit cards will be charged a fee equivalent to the cost of one night's accommodation in case of non-arrival or cancellation after January 1st, 2009. In the case of non-arrival and the hotel room cannot be re-sold, the full cost of accommodation will be levied. All changes in itineraries or cancellations must be made in writing to INCTR.