ASPIRE Masterclass 2015
7 & 8 November 2015
Siem Reap, Cambodia

REGISTRATION FORM

Please complete this form, sign it and send it to ASPIRE Secretariat at cdeguerville@kenes.com.

PERSONAL PARTICULARS			
Salutation:	☐ Prof. ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Others, please specify _____		
First Name:		**Last Name:**	
Position:		**Department:**	
Institution:			
Address:			
Tel:		**Fax:**	
Email:		**Mobile:**	
Meal Request: ☐ Vegetarian *(Meals provided during the course are no pork no lard)*			

Please tick against the box accordingly to indicate your participation and request.

☐ **Yes, I would like to register for the ASPIRE Masterclass (7-8 November 2015)**

Course Fees: USD 1,600 *(inclusive of course materials and meals during the course)*

Hotel Accommodation at ASPIRE Masterclass Venue Hotel – Sofitel Siem Reap

☐ I would like to book ☐ Single Room ☐ Double/Twin – Sharing Room

Hotel Room Rate: USD 190 nett per room per night *(inclusive of breakfast and wi-fi in room)*

Please fill in your check-in and check-out dates

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Check-in Date	**Check-Out Date**	**Total night/s**

*** Please take note that official check-in time is 1500 hrs and check-out time is 1200 hrs. Early check-in and late check-out requests are subject to availability and additional charge may apply.*

Airport Return Transfers

☐ Yes, I would like to book the Sofitel hotel airport transfer
☐ No, thank you. I will make my own way.

Please fill in your flight details.

Arrival Date		**Flight Number**		**Arrival Time**	
Departure Date		**Flight Number**		**Departure Time**	

Cancellation Policy:

Refund of registration fee will be as follows:

- Prior to August 31st, 2015 - 50% refund
- From September 1st, 2015 - no refund

Note: In case of cancellation at any stage, an administration fee of 30 USD will not be refunded.

Signature & Date