

MILK BANKING 2010: NICE New Beginnings

www.ukamb.org

Delegate Booking Form

(Please PRINT Clearly)

Surname First Name

Prof Dr Mrs Miss Ms

Job Title

Address

Postcode Country

Hospital / Company

Tel Fax

Email

UKAMB Individual / Professional Member: Yes No Membership Number

OR UKAMB Member Milk Bank / Recipient Hospital Member: Yes No

Registration Fees

(Please Tick Relevant Box)

UKAMB Member

£60

Non UKAMB Member

£75

Unwaged/Students/Volunteers

£50

Member Milk Banks and Recipient Hospital Members: Up to 5 delegates at UKAMB Member rate plus if you book 5, 6th place offered free (buy five get one free!)

Lunch and refreshments included. Vegetarian choices available

Accommodation is available locally: See UKAMB website for further information

UKAMB AGM will be held on Saturday 9th October 2010 at the same venue

I enclose a cheque made payable to UKAMB for £ (Please Complete)

Please return this booking form to Gillian Weaver at the address below.

- All applications must be accompanied by the registration fee
- Invoices will not be issued for registration fees
- A receipt will be sent as confirmation of booking

Please use
copies of this form
for additional
delegates