

# REGISTRATION FORM CONFERENCE DINNER ONLY

*This registration form is for people who want to attend the conference dinner only. Conference attendees should select "Conference dinner" on the conference registration form.*

Name (First+Last) \_\_\_\_\_  Male  Female  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip code \_\_\_\_\_  
Country \_\_\_\_\_  
Telephone no. \_\_\_\_\_  
Email address \_\_\_\_\_

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## **Confirmation**

Your registration will be final as soon as both this form and payment of NLG 120 have been received. After receipt of your registration form AND payment, you will receive a confirmation by e-mail or postal mail.

## **Badge**

Your badge for the conference dinner and receipt will be given to you at the registration desk. (Opening hours of the registration desk: Tuesday November 17, 1998, 07:00 p.m. - 09:00 p.m. and Wednesday November 18, 1998, 08:00 a.m. - 10:00 a.m. and 07:00 p.m. - 09:00 p.m.)

## **Refund/Cancellation**

If you must cancel, all refund requests must be in writing with your signature and postmarked no later than October 19, 1998. No refunds will be given for cancellations received after October 19, 1998. Telephone cancellations cannot be accepted.

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## **Payment**

Payment (Dutch guilders only) must accompany this form. Purchase orders, checks, vouchers, email and telephone registration cannot be accepted.

Charge to my  VISA  MasterCard  American Express

Account no. \_\_\_\_\_ Exp. date \_\_\_\_\_

Print cardholder's name \_\_\_\_\_

Cardholder's address \_\_\_\_\_

Cardholder's signature \_\_\_\_\_

Bank transfer in the amount of NLG 120 incl. VAT will be paid to:

Stichting SANE '98  
Postbank, Swift code: ING B NL-2A  
Account # 7902828

**Mentioning your NAME and PARTY-SANE98**

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*Please complete this registration form and return it along with full payment to:*

Stichting SANE '98, PO Box 22727, NL-1100 DE AMSTERDAM, The Netherlands  
Fax: +31 (0)20 6950018