

**Forensic Cultures in Interdisciplinary Perspective**

CHSTM, University of Manchester, 11-12 June 2010

## Registration Form

BLOCK LETTERS PLEASE

Surname \_\_\_\_\_ First name \_\_\_\_\_ Title \_\_\_\_\_

Organisation \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Registration and Payment:** The conference will run from mid-morning on Friday 11<sup>th</sup> June until the afternoon of Saturday 12<sup>th</sup> June. Registration for the conference dinner is optional. Please tick the appropriate box below.

If you are paying by cheque, please complete this form and make your cheque payable to the University of Manchester and drawable on a British bank. For credit card bookings, please complete this form and the **CREDIT/DEBIT CARD RECEIPT** form.

Completed forms and payment must be received by **15 May 2010**. They should be sent to:

Gillian Mawson, CHSTM, Simon Building 2<sup>nd</sup> Floor  
Brunswick Street, University of Manchester  
Manchester, M13 9PL United Kingdom

Please select from the following two options:

Conference fee, <b>without dinner</b> : Includes Friday and Saturday lunches and coffee/tea at each programme break	£80	
*Conference fee, <b>with Friday dinner</b> : Includes the above plus 3-course dinner at the Christie Bistro, and evening event: "Screening Forensics"	£120	

\*Please let us know if you have special dietary requirements:

- € Vegetarian
- € Vegan
- € Other (please specify)

**Accommodation:** Conference participants will need to make their own accommodation arrangements. A list of suitable hotels can be found at:

<http://www.careers.manchester.ac.uk/students/events/fairs/overnightaccommodation/>

Participant's Signature \_\_\_\_\_

Date \_\_\_\_\_

CREDIT/DEBIT CARD RECEIPT  
CUSTOMER NOT PRESENT

FOR INCOME OFFICE USE  
Receipt Number:

**TO BE FILLED IN BY CREDIT CONTROL**

ACCOUNT NAME: .....

INVOICE NUMBER.....ACCOUNT CODE.....

CONTACT NAME.....CONTACT NUMBER.....

DEPOSITED BY: .....

*Please attach an addressed pre paid envelope if you require a receipt sending to the customer*

**FOR INCOME OFFICE USE ONLY**

REASON RETURNED

- The card has been declined       The card has expired       The card number is invalid
- Valid from/Expiry date missing       No Issue Number       No Finance Code quoted/Finance Code invalid
- American Express/Discover Card       The PDQ machine is not accepting the card
- Other reason .....

CUSTOMER DETAILS

NAME ON CARD .....

CARDHOLDERS ADDRESS .....

(per statement)  
INC POSTCODE .....

CONTACT TELEPHONE .....

CONTACT E MAIL ADDRESS .....

AMOUNT £ .....

CARDHOLDERS SIGNATURE **CUSTOMER NOT PRESENT**



CARD ISSUED BY (BANK OR EQUIVALENT) .....

CARD NUMBER (On the front of the card).....

SECURITY NUMBER:(On the back of the card) .....

CARD TYPE: VISA..... MASTERCARD.....

MAESTRO..... CARD ISSUE NUMBER.....

VISA/DELTA..... JBC.....

SOLO..... CARD ISSUE NUMBER.....

VALID FROM DATE..... EXPIRY DATE.....

**CARD DETAILS TO BE DETACHED AND DESTROYED AFTER TRANSACTION COMPLETION**