

REGISTRATION – ACCOMMODATION FORM

Please complete the form in capital letters and keep a copy for your records.
A separate registration form must be completed for each participant.

Registration ID
(Office Use Only)

Participant Information

Title :	<input type="checkbox"/> Prof	<input type="checkbox"/> Dr	<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	
First Name *:					
Last Name *:					
Institution *:					
Department:					
Address:					
City *:					
Province or State :					
Postal or Zip Code:					
Country *:					
Telephone *: (Including country code)					
Fax: (Including country code)					
Mobile: (Including country code)					
E-mail * (Institute):				@	
E-mail * (Personal):				@	

* These are mandatory fields.

Dietary or other special requirements:

Invoice Information

Company Name:
Company Address:
Tax Office:
Tax No:

Registration Information

Please select the amount of the registration category

Registration	Early Bird Registration Before or on March 15, 2017	Late Registration Between or on March 15 – May 08, 2017	Onsite Registration On or after May 08, 2017
Regular Participant	<input type="checkbox"/> USD 750	<input type="checkbox"/> USD 850	<input type="checkbox"/> USD 950
Physicians in training *	<input type="checkbox"/> USD 250	<input type="checkbox"/> USD 350	<input type="checkbox"/> USD 450
Technologists, Nurses *	<input type="checkbox"/> USD 250	<input type="checkbox"/> USD 250	<input type="checkbox"/> USD 250
Industry Members **	<input type="checkbox"/> USD 400	<input type="checkbox"/> USD 500	<input type="checkbox"/> USD 600
Registration Total:			

Please fill out this form and send it to: DEKON CONGRESS & TOURISM

Sultan Selim Mah. Hümeýra Sok. No.12 34415 Kağıthane - Istanbul – TURKEY

Phone: +90 212 347 63 00 Fax: +90 212 347 63 63 Email: registration@wlnc.org

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- Only registration accompanied by the full payment will be considered, registration will be confirmed after receiving the payment. Those who do not receive a confirmation notice before the conference, are requested to contact the registration secretariat at registration@wlnc.org
- The date of payment is decisive for the registration fee. Even if the registration form is received before the early bird deadline, it will not be considered as early registration if the payment has not been received before the deadline.

* To be eligible for physicians in training / technologists / nurses rates, participants are required to produce documentary evidence of their status (such as a copy of ID card or an official statement on university or institution letterhead). Without this documentation, regular fees will be applied.

** Industry Members registration type is only valid for company representatives from WLNC sponsor companies

I will attend the Social Reception on May 16, 2017

Registration Fees include:

- Participation to all scientific sessions & learning labs during 3 days
- Entry to the Exhibition Hall
- Conference documents
- Coffee breaks & Lunches to be served during the Scientific Program
- Social Reception on May 16, 2017

Cancellation Policy – Registration:

Cancellation of Registration must be received in writing by the WLNC 2017 Registration Secretariat (DEKON) by fax at +90 212 347 63 63, or via e-mail to registration@wlnc.org. An administrative fee of USD 100 will be applied for any cancellation received before or on **February 15, 2017**.

For cancellations received between or on **February 16 – March 21, 2017**: Eligible for 50% refund

Absolutely no refund will be processed for cancellations received on or after March 22, 2017.

Please note that registration refunds will be processed within 30 days after the end of WLNC 2017, bank charges will be deducted from the refund.

Accommodation Information

Hotel	Category	Location	Single Room	Double Room
The Westin Bonaventure Hotel & Suites	5 Star	Conference Venue	<input type="checkbox"/> USD 279	<input type="checkbox"/> USD 279

- The Westin Bonaventure Hotel & Suites is the venue of WLNC 2017.
- Please make your reservations early, bookings are on a first-come first-served basis.
- Above room rates include wifi but **do not** include breakfast and 15.695% service charge.
- For any queries about hotel matters, please contact us via email: registration@wlnc.org
- Deadline for hotel reservations is May 02, 2017. For reservation requests after that date, Dekon may not be able to guarantee any available rooms with the above-mentioned room rates.
- Reservations will be confirmed only after receiving the full payment by credit card or bank transfer.
- Hotel check-in time is 15:00 and check-out time is 11:00. If you expect to arrive earlier than the check-in time and require guaranteed check-in on arrival, please make your hotel reservations for the day before.

Please Reserve:

Check-In: / / 2017	Check-Out: / / 2017	Total Number of Nights:
Single Room : Room(s) X USD (Price) X Nights = USD (Total cost)		
Double Room: Room(s) X USD (Price) X Nights = USD (Total cost)		
For double rooms, please select: <input type="checkbox"/> King bed (one big bed) <input type="checkbox"/> Twin bed (two single beds)		
Sharing the room with: <input type="checkbox"/> Accompanying Person:		
<input type="checkbox"/> Another Participant:		
Special Requests, if any:		
Accommodation Total:		

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- Cancellations received before or on **April 10, 2017** – eligible for full refund, less one night deposit
- Cancellations received on or after **April 11, 2017** – no refund

Please note that accommodation refunds will be processed within 30 days after the end of WLNC 2017, bank charges will be deducted from the refund.

In the event of non-arrival, the hotel will automatically release the reservation and full payment will be non-refundable.

Late arrival /Early Departure Fee - If you arrive later or leave earlier than on the dates of your confirmed booking, the total cost of accommodation will be charged and no refunds will be issued.

GRAND TOTAL : USD

I ACCEPT THE GENERAL CONDITIONS FOR REGISTRATION & ACCOMMODATION

Payment Information

Payment by Wire Transfer:

For payment by wire transfer, please use the following bank account:

Account Name	DEKON Kongre ve Turizm A.S.
Bank Name	T.Garanti Bank – Istanbul – Turkey
Branch Name / Code	Esentepe Branch / 347
Swift No	TGBATRISXXX
IBAN No (USD)	TR96 0006 2000 3470 0009 0939 18

- Bank charges are the sole responsibility of the participant and should be paid in addition to the fees.
- All wire transfers should indicate the following information: “Name of Sender, Date of wire transfer, Amount of wire transfer & Explanation” and receipts must be sent by fax to DEKON at: +90 212 347 63 63, or by e-mail to: registration@wlnco.org

Payment by Credit Card:

Visa

Master

Credit Card Number:	
Expiry Date:	Card Verification Code: <small>Last 3 digits at the back of your card, on the signature panel</small>
Cardholder's Name:	
Date:	Cardholder's Signature:

You may also register and pay using online registration form on the official website
www.wlnco.org

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