

PVS SPRING MEETING

The Burlington Hotel
Upper Leeson Street, Dublin 4, Ireland
Tel: 00353 1660 5444 Fax: 00353 1668 9496 Internet
www.jurysdoyle.com/burlington

Kindly sponsored by
Alpharma

Credit Card Registration Form

Name: .....

Address: .....

Postcode (Important pls include).....

Telephone: .....

E-mail: .....

(Please supply telephone number and/or e-mail address in case of a query with your card)

Note: Permission for guests to attend must be obtained from the President, Mr David Burch

Please tick as appropriate Late Registrations will incur a £25.00 Booking Fee

- o Full registration at £223.25 per person. Number of persons =
o Day registration for Thurs 10 May 2007 at £111.62 per person. No. persons =
o Day registration for Friday 11 May 2007 at £111.62 per person. No. persons =
o Please debit my Visa/Mastercard, details given below (please print details clearly)

Card type: VISA / Mastercard / Eurocard / Access (other types of card not accepted)

Card Number:

Grid for card number with dashes in the 4th, 8th, and 12th positions.

Grid for Security Code and Expiry Date.

Name of Cardholder (as appears on card): \_\_\_\_\_

Address of cardholder (if different to above): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return the completed forms to:
Mrs Jenny Murray, Elanco Animal Health, Kingsclere Road, Basingstoke, Hampshire,
RG21 6XA, England Fax: 01256 315081 or e-mail: Murray.Jennifer@lilly.com
Please Note: Closing Date for Registrations is Friday 13 April 2007