# Course registration form

AOTrauma Course - Foot and Ankle for Surgeons  
9 - 11 June 2010  
Clifton Pavilion, Bristol Zoo

<table>
<thead>
<tr>
<th>Course registration for:</th>
<th>Course Fee:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] AOTrauma Course - Foot and Ankle for Surgeons</td>
<td>£950.00</td>
</tr>
<tr>
<td>[ ] Course dinner</td>
<td>£30.00</td>
</tr>
</tbody>
</table>

## Personal data (Please write clearly in BLOCK CAPITALS to avoid error)

- **Title:** Dr/Mr/Mrs/Miss/Ms
- **Surname**
- **First Name**
- **Position**
- **Speciality**
- **Hospital**
- **Preferred Mailing Address**

- **Postcode**
- **Personal Contact Telephone**
- **Work Contact Telephone**
- **Fax**
- **Email**

**Name for Certificate (please write clearly in BLOCK CAPITALS to avoid error)**

**Please indicate if you have any special dietary requirements:**

**Signature**

**Date**
Payment

Applications cannot be accepted without full payment and a completed registration form.

[ ] Cheque made payable to ‘AO Course Account’

[ ] Bank transfer
Please contact the course organisers if you wish to pay by bank transfer

[ ] Credit or Debit card
Please use the form below if you wish to pay by credit or debit card. Credit card payments are subject to a 2% transaction charge.

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Card type

- [ ] Visa Debit
- [ ] Solo
- [ ] Maestro
- [ ] Mastercard (2% charge)
- [ ] Visa Credit (2% charge)

Credit card number


Three digit security code (from back of card)


Card valid from (mm/yy)  Card expiry date (mm/yy)  Issue number (Maestro only)


Name as it appears on card


Cardholder signature  Date

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All card details will be destroyed once transaction has been processed.

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Please return your completed registration form, with payment to:

AOUK Education  Tel  +44 (0) 1707 395212
PO Box 328  Fax  +44 (0) 1707 391606
Welwyn Garden City  Email  info.gb@ao-courses.com
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