**Booking Form – 31 October 2018**

**PLEASE BOOK ONLINE IF POSSIBLE** – [www.scimednet.org](http://www.scimednet.org/) (and click on ‘Events’)

**OTHERWISE WRITE IN BLOCK CAPITALS & post to**

**Conference Administrator, Scientific and Medical Network, Colet House, 151 Talgarth Road, London W14 9DA, Email: info@scimednet.org**

Name ...........................................................................

Address ...........................................................................

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Email …………………………………………………

### Please book me:

### [ ] places at £10

### [ ] concessionary places at £5 (full time students only)

**INCLUDES A HARD COPY OF THE REPORT SUMMARY**

### PAYMENT OPTION

[ ] Cheque (payable to “**SMN**”)

[ ] Credit card (VISA or MasterCard)

Card No.: ................................................. Expires: .............

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