

ANNUAL MEETING OF THE BALKAN, BLACK SEA AND CASPIAN SEA REGIONAL NETWORK ON SPACE WEATHER STUDIES March 30 - April 01, 2006

<http://www.ihy2007.boun.edu.tr/index.htm>

Please fill - in and return this Form by fax or mail to The Official Tour Operator of IHY Meeting 2006, Turkey
Der-Tur Tours & Travel, Istiklal Cad. Galatasaray Ishani, No:230, 34430, Beyoglu, Istanbul, Turkey
Phone: +90 212 249 8127 **Fax:** +90 212 243 52 67 **E-mail:** dertur@dertur.com.tr

BOOKING & PAYMENT FORM

Registration fee 150 USD

PARTICIPANT INFORMATION

Please provide the information requested below, as you wish it to appear on your badge and in the list of participants.

Surname First name

Company / Institution Position / Title

Address

City/Postal Code Country

Phone (country, area codes) - - Fax (country, area codes) - -

E-mail Accompanying Person Name

1 NIGHT / SURAL GARDEN HOTEL***, MANAVGAT

Please check the web-site for further details.

Single Double Twin

Hotel	Single	Double/Twin	No. of Days	Check In	Check Out	USD
Sural Garden Hotel	76 USD	110 USD	-----	-----

I will be accompanied by
To avoid any inconvenience, please specify the accompanying person name
Hotel prices include "All Inclusive System" service and VAT (18%)

ARRIVAL / DEPARTURE INFORMATION, TO/FROM ANTALYA

Arrival Date / / 2006 Flight No.: Time:

Departure Date / / 2006 Flight No.: Time:

You will be met by a DER-TUR representative at Antalya Airport and transferred to Sural Garden Hotel

PAYMENT ALTERNATIVES

For terms of payment, cancellation and refunds, please check the web-site.

Payment must be made in USD. Please state your name and address clearly on money orders.

1-) BANK TRANSFER

Payment must be made in USD. Please state your name and address clearly on money orders and send your bank receipt by fax to +90 212 243 52 67 (Der-Tur)

Remitted to:

DETTUR Tours and Travel; Yapi Kredi Bank, Beyoglu Branch, Istanbul, Turkey;
USD account no: 3007426-0, swift code YAPITRIS015 with reference family name and IHY Meeting

2-) CREDIT CARD

Following credit card details are required:

Type of card: VISA MASTER CARD AMERICAN EXPRESS

Card number

Card holder's name: Expiration date: / /

Card holder's signature (essential): **I will pay in total:**

Signature Date ____ / ____ / ____