

**Auxetics2009@Bolton**

**6th International Workshop**

**Registration Form**

<b>Title:</b>	
<b>Surname:</b>	
<b>First name:</b>	
<b>E-mail:</b>	
<b>Job position title:</b>	
<b>Tel. No:</b>	
<b>Fax:</b>	
<b>Affiliation / Address:</b>	
<b>City</b>	
<b>Country</b>	
<b>Post code</b>	

**I will be attending on (please tick relevant box(es)):**

- Full 4 days
- Monday 14<sup>th</sup> September 2009
- Tuesday 15<sup>th</sup> September 2009
- Wednesday 16<sup>th</sup> September 2009
- Thursday 17<sup>th</sup> September 2009

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**Payment by Invoice Form**

<b>Invoice Request:</b>		
<b>Contact Name:</b>		
<b>Invoice To (Address):</b>		
<b>Registration Fee:</b>	£	(€ )
<b>Dinner:</b>	£	(€ )
<b>Total Amount</b>	<b>£</b>	<b>(€ )</b>

Email the completed form to: [dz1@bolton.ac.uk](mailto:dz1@bolton.ac.uk) or fax to: +44- (0)1204-399074

For payment queries please contact Donna Zarei on: +44 (0) 1204 903101