



2011 Bird Strike North American
Conference
September 12 - 15, 2011
Niagara Falls, ON, Canada



**PREFERRED
REGISTRATION METHOD
Is via the WEB at**

www.birdstrikecanada.com

REGISTRATION FORM

A. REGISTRATION INFORMATION - Please fill in BLOCK LETTERS (Complete one Registration Form per Delegate)

By completing this Registration Form, you have released your contact information for use by the 2011 Bird Strike North America Conference (BSNAC2011), unless otherwise indicated in the check box below, and you have read, understood and agree to all cancellation policies and terms and conditions outlined throughout this form, brochure and the website.

ICS use only	

DELEGATE INFORMATION	
Title (check one)	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other _____
Family Name	
Given Name	
Organization/Association	
Position	
Street Address	
City	Province/State
Country	Postal Code/Zip Code
Telephone (Country Code, Area Code)	Fax (Country Code, Area Code)
Email (Mandatory for Confirmation Letter)	
Preferred Name for Badge	

Please indicate special requirements (e.g. dietary/mobility): _____

Please check the box if you **DO NOT** want your name to be included on the Participant list.

B. FULL DELEGATE REGISTRATION includes: Name Badge, Conference Bag, Welcome Reception as well as access to all Program Sessions, Sponsored field Trip, Poster Boards, Trade Show, and On-site Program. This year's Conference Registration also includes a one year membership to Bird Strike Association of Canada.

FULL CONFERENCE REGISTRATION				
CATEGORY	EARLY REGISTRATION (On or Before June 1, 2011)	REGULAR REGISTRATION (On or Before August 31, 2011)	LATE/ONSITE REGISTRATION (After August 31, 2011)	TOTAL
<input type="checkbox"/> Registration	\$ 448.00 CAD	\$ 504.00 CAD	\$ 560.00 CAD	\$ _____ CAD

Payment must be received on or before June 1, 2011 to qualify for the Early Registration Fee and on or before August 31, 2011 to qualify for the Regular Registration Fee. Registrations received after August 31, 2011 will be processed at the Late/Onsite Registration Fee. **Registrations will not be processed until payment is received in full.**

REGISTRATION SUBTOTAL \$ _____ CAD

C. ACCOMPANYING PERSON REGISTRATION includes: Accompanying Person(s) will enjoy an Authentic Niagara Falls experience, two (2) lunches at the Conference Hotel Restaurant, as well as participation at the Welcome Reception.

ACCOMPANYING PERSON INFORMATION		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other _____
Given Name		
Family Name		

Please indicate special requirements (e.g. dietary/mobility): _____

ACCOMPANYING PERSON REGISTRATION				
CATEGORY	EARLY REGISTRATION (On or Before June 1, 2011)	REGULAR REGISTRATION (On or Before August 31, 2011)	LATE/ONSITE REGISTRATION (After August 31, 2011)	TOTAL
<input type="checkbox"/> A/P Registration	\$ 224.00 CAD	\$ 252.00 CAD	\$ 280.00 CAD	\$ _____ CAD

Please note: Your Accompanying Person registration fee's includes up to four (4) tours if you wish to participate in all four of them. Please indicate below what tour(s) you are interested in participating in:

- | | |
|---|--|
| Option#1: Maid of the Mist <input type="checkbox"/> | Option#3: Niagara's Fury: Creation of the Falls <input type="checkbox"/> |
| Option#2: Journey Behind the Falls <input type="checkbox"/> | Option#4: White Water Walk <input type="checkbox"/> |

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REGISTRATION SUBTOTAL \$ _____ CAD

RETURN COMPLETED FORM & PAYMENT TO (send only once):

International Conference Services Ltd., 2101 - 1177 West Hastings St., Vancouver, BC, Canada, V6E 2K3
FAX: +1 604 681 1049 • TEL: +1 604 681 2153 • E-mail: Birdstrike-registration@icsevents.com



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D. ACCOMMODATION: The hotel choices can be found on the Conference Website at www.birdstrikecanada.com. If you have questions regarding accommodation or are requesting an upgraded room, please contact the Conference Secretariat at the following email: Birdstrike-registration@icsevents.com.

Room Preference Smoking Non-Smoking Wheelchair Accessible

1st CHOICE _____ King/Queen 2 Double Beds Upgrade

Arrival Day/Date _____ Departure Day/Date _____ # of Nights _____ # of Rooms Required _____

Special Requirements (allergies etc.) _____

I will be sharing a room with: Accompanying Person(s) Fellow Delegate My Family (Please clearly print names below)

Credit card will be used to guarantee your reservation (for hotel use only)
(Hotel may charge one night room and tax to the credit card provided.)

Visa MasterCard American Express

Cardholder's Name (as it appears of the Card*): _____

Credit Card Number: _____ Expiry Date: _____/_____/_____

Cardholder Signature: _____

If you do not have a credit card, you may send a company cheque or bank transfer deposit in the amount of **\$245.00 CAD** per room which is required to secure your hotel reservation. Reservation requests received without a valid credit card number, company cheque or bank transfer deposit will not be processed. Please use the banking information as noted in the payment section below.

If the credit card provided will be used to pay hotel accommodation and does not belong to the Registered Delegate, please contact the Congress Secretariat at Birdstrike-registration@icsevents.com

A hotel credit card authorization form will be sent to you for completion and a photocopy of the front and back of the card is required.

*For hotel cheque or bank transfer deposit only \$ _____ CAD

ACCOMMODATION - CANCELLATION AND RESERVATION CHANGES

Please contact the Conference Secretariat at Birdstrike-registration@icsevents.com to make changes to an existing reservation or to cancel your reservation (please do not contact the hotel directly). Cancellations or changes WILL NOT be accepted by phone. All cancellations or changes must be requested in writing by mail, fax or email (preferred).

CANCELLATION POLICY

Cancellations must be made no later than **2 weeks prior to arrival** to avoid a penalty charge of one night room and tax which will be applied to the credit card on file or loss of cheque or bank transfer deposit.

Please Note: Failure to arrive on the scheduled arrival date will result in cancellation of the hotel reservation and a charge equal to one night room and tax or more will be charged to the credit card number given above or loss of cheque or bank transfer deposit. Please confirm the length of your stay with the hotel at check-in time. Should you decide to leave earlier, the hotel may charge an early departure fee or for all nights reserved. **If you have any questions, please email:** Birdstrike-registration@icsevents.com

➔ **IF YOU HAVE NOT USED THE BSNAC2011 SECRETARIAT TO MAKE YOUR RESERVATION, PLEASE PROVIDE THE NAME OF** ➔
THE HOTEL WHERE YOU ARE STAYING FOR EMERGENCY CONTACT PURPOSES: _____

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TOTAL PAYABLE SUMMARY (Please Add Sections B, C, D)		TOTAL
SECTION B	FULL DELEGATE REGISTRATION	\$ _____
SECTION C	ACCOMPANYING PERSON REGISTRATION	\$ _____
SECTION D	ACCOMMODATION	\$ _____
TOTAL		\$ _____

METHOD OF PAYMENT: Payment can be made by credit card, company cheque, bank draft, money order, or bank transfer.

Visa MasterCard American Express

Cardholder's Name (as it appears on the Card*): _____

Credit Card Number: _____

Expiry Date: _____ / _____ Security Code (3 digit number on back of card): _____

Cardholder Signature: _____

Charges on your credit card statement will appear as "International Conference Services Ltd." And will be converted to your currency.

* **Note:** If the Cardholder's name is different from the registered Delegate's name, a Credit Card Authorization Form is required to be completed by the Cardholder together with a copy of the front and back of the Credit Card. Please download the Credit Card Authorization Form from the Conference Website at: www.birdstrikecanada.com

Company Cheque (Personal Cheques not accepted) Bank Draft/Money Order Bank Transfer

Please ensure that **Your Name** and the words "**EVENT: "BSNAC2011"**" appear clearly on any cheques, bank drafts, money orders or bank transfer payments.

Cheques are payable to "International Conference Services c/o BSNAC2011."

Bank Transfers & Money Orders:

Beneficiary Name: International Conference Services Ltd/BSNAC2011
Suite 2101 – 1177 West Hastings Street
Vancouver, BC V6E 2K3 CANADA

Beneficiary Account No: #270-247-475-020
Beneficiary Bank: HSBC Bank of Canada
Swift Code: HKBC CATT
Bank Address: HSBC Canada
885 West Georgia Street
Vancouver, BC V6C 3G1 CANADA

Cheques, bank drafts, money orders and bank transfers will only be accepted in CAD dollars and must be drawn on a Canadian Bank. **All fees include 12% HST. (HST# 102510609Rt0001).**

It is the Delegate's responsibility to ensure all bank transfer fees are paid over and above the registration fees owed. Otherwise, Delegates will be asked to pay any outstanding balance at the on-site registration desk.

REGISTRATION - REFUND & CANCELLATION POLICY: Registration cancellations received in writing at the BSNAC2011 Conference Secretariat's address by **August 12, 2011** will be accepted and all fees refunded, less a **\$100.00** administrative fee. Cancellations received after **August 31, 2011** are 100% non-refundable; however, transfer of your registration to another person is acceptable. A completed Registration Form for the new person must be faxed or mailed to the Conference Secretariat prior to the Conference, explaining who is being replaced. **DO NOT USE THE ON-LINE REGISTRATION FORM FOR THIS PROCEDURE.** No refunds will be made for non-attendance at the Conference.

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