

Kenya Association of Radiologists

2017 Annual Scientific Conference at Sarova Whitesands, Mombasa

REGISTRATION FORM FOR KAR ANNUAL SCIENTIFIC CONFERENCE 2017 AT SAROVA WHITESANDS IN MOMBASA

NAME:

POSTAL ADDRESS:

TEL: MOBILE: OFFICE:

E-MAIL ADDRESS:

I WISH TO PRESENT THE FOLLOWING PAPER:

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<u>Annual subscription: (Must be valid for 2017)</u>		<u>Please tick</u>		<u>Amount</u>
Members	KShs. 5,000			
Associate members ¹	KShs. 2,000			
<u>Registration</u>				
Members/Non-members	KShs. 12,000			
Associate members ¹ (Presenting paper)	KShs. 4,000			
Associate members (Not Presenting paper)	KShs. 9,000			
<u>Accommodation (Full Board at Sarova Whitesands)</u>	<u>Thu 1st June and Fri 2nd June</u>	<u>Number of persons</u>	<u>Extra nights (specify dates)</u>	<u>Amount</u>
<u>Standard Room</u>				
Members (Sharing)	FREE			
Members (Single room)	KShs. 3,000 / NIGHT			
NON- MEMBERS/ACCOMPANYING PERSONS:				
Sharing	KShs. 8,500			

¹ Associate members who are or were registrars/residents during 2017

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	/ NIGHT			
Single Room	KShs. 11,500 / NIGHT			
CHILDREN: (3-12 YEARS)- sharing with two adults	KShs. 4,250 / NIGHT			
<u>Palm Room</u>				
Members (Sharing)	KShs. 1,000 / NIGHT			
Members (Single room)	KShs. 7,000 / NIGHT			
NON-MEMBERS/ACCOMPANYING PERSONS:				
Sharing	KShs. 9,500 / NIGHT			
Single Room	KShs. 15,000 / NIGHT			
CHILDREN: (3-12 YEARS)- sharing with two adults	KShs. 4,650 / NIGHT			
<u>Seafacing Room</u>				
		<u>Number of persons</u>	<u>Extra nights (specify dates)</u>	<u>Amount</u>
Members (Sharing)	KShs. 1,500 / NIGHT			
Members (Single room)	KShs. 9,000 / NIGHT			
NON-MEMBERS/ACCOMPANYING PERSONS:				
Sharing	KShs. 10,000 / NIGHT			
Single Room	KShs. 17,000 / NIGHT			
CHILDREN: (3-12 YEARS)- sharing with two adults	KShs. 4,950 / NIGHT			
<u>GRAND TOTAL</u>				

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(Any child aged 3-12 years and not sharing with **two** adults will be charged as an adult)

Names of all accompanying persons:

- 1.
- 2.
- 3.
- 4.

Names of all children with age and gender:

- 1.
- 2.
- 3.
- 4.

Last date for abstract submission and registration is May 15, 2017.

Payment details:

Payment is by transfer of funds to the Kenya Association of Radiologists bank account.
Details are as follows:

Account name: Kenya Association of Radiologists

Bank: Kenya Commercial Bank (KCB)

A/c No. : 046199000289

Branch : Capital Hill.