# XIVth International Botrytis Symposium

21 - 26 October 2007, Cape Town South Africa

# **REGISTRATION FORM**

# **HOW TO REGISTER**

FAX the completed form to the Symposium Secretariat at Fax + 27 21 883 8177.

,	'		
A. DELEGATE First name: Family name: Company: Postal Address: City: Country: Tel: Fax: E-mail:		Zip / Postal Code: Country telephone	code:
B. ACCOMPANYING PERSON(S * The accompanying persons facilities, the Opening Cocktail fur Excursion and Cocktail at Nederla programme. All registered accompersons tours (please refer to sec	fee includes an official na nction (CTICC), Official Afr ourg Wine Estate. It exclud ompanying persons can b	ican Dinner (Moyo) and the	Winelands Symposium
First name:			
Family name:			
,			
First name:			
Family name:			
C. REGISTRATION FEES			
Registration fees	Early bird registration (until 20 August 2007)	Late registration (from 21 August 2007)	Your Amount
Delegate	R 3 900.00	R 4 400.00	
Accompanying person	R 1 050.00	R 1 350.00	
		Sub total 1	

**Student registration** is available. For more details please contact the Symposium Secretariat at email <u>deidre@iafrica.com</u>.

# D. FUNCTIONS

Function	Date	Cost	No of persons
Opening Cocktail function -	Sun, 21 October	Included in	
CTICC		Registration fee	
Official African Dinner - Moyo	Tues, 23 October	Included in	
		Registration fee	
Winelands Excursion and	Thurs, 25 October	Included in	
Cocktail function- Nederburg		Registration fee	

# E. TOURS: ACCOMPANYING PERSON PROGRAMME

Tours	Date	Cost/person	No. of persons(s)	Your Amount
Option 1: The Cape Winelands	22 Oct 2007	R 450.00		
Option 2: Cape Town and Table Mountain	23 Oct 2007	R 430.00		
Option 3: Cape Peninsula/Cape Point Tour	24 Oct 2007	R 475.00		
			Sub total 2	

## F. GENOME WORKSHOP

	Date	Cost/person	No. of persons(s)	Your Amount
Genome Workshop: Stellenbosch (11:00 – 15:00)	25 Oct 2007	R 150.00		
			Sub total 3	

# **G. TOTAL COST**

TOTAL AMOUNT DUE (excl. accommodation) ZAR	
--	--

# H. PAYMENT

If you wish to pay by <u>Credit Card</u>, please print the Credit Card Payment form (<u>click to download</u>) and fax the completed form with the signature of the card holder to Fax + 27 21 883 8177.

Please contact the Secretariat for bank details and instructions, if you wish to pay by <u>Bank Transfer.</u>

**Please note**: If paying by credit card please provide the last three digits on the back of your credit card.

If paying by bank transfer, payment can only be confirmed once the Symposium Secretariat receives the proof of the electronic transfer by fax (Fax +27 21 883 8177)

# I. CANCELLATION POLICY

Cancellations must be made in writing and sent to the Symposium Secretariat, Conferences et al. If cancellation is received on or before 31 August 2007, the registration fee will be refunded (less a R350 administration fee).

From 1 September until 14 September, 50% of the registration fee will be refunded. As from 15 September, registration fees will not be refunded. No shows will not be refunded.

Your registration may be transferred to another person at no charge, subject to written notification to Conferences et al prior to the Symposium.

J. Special Requests	J.	Spec	ial R	egu	ests
---------------------	----	------	-------	-----	------

(Please indicate, where applicable)

Dietary requirements (Kosher, Halaal & Vegetarian):	
Disabilities (wheelchair facilities):	
Smoking/Non Smoking:	
Please send me more information on:	
Pre/Post Conference Tours	

# HOTEL RESERVATION FORM

# A. ACCOMMODATION

Hotel	Room Type	Rate per room per night	Distance from CTICC
ArabellaSheraton Grand Hotel	Deluxe Single	R 2 015.00	Adjacent to
	Deluxe Double	R 2 190.00	CTICC
Cullinan Hotel	Standard Single	R 1 415.00	Opposite the
	Standard Double	R 1 585.00	road
Southern Sun Waterfront	Standard Single	R 1 260.00	Opposite the
	Standard Double	R 1 470.00	road
Commodore Hotel	Standard Single	R 1 110.00	10 min walk
	Standard Double	R 1 610.00	
Protea Hotel Breakwater Lodge	Family Unit	R 990.00	15 min walk

### **IMPORTANT NOTES:**

- Breakwater Lodge: Family Unit is made up of two rooms (one double bedded and one twin bedded) with
  en suite toilet and shower facilities. If two persons share a family unit i.e. one person per room in the unit,
  the rate will be R495 per person room only. If four persons share a family unit ie two persons share each
  room in the unit, the rate will be R247.50 per person sharing room only
- The ArabellaSheraton Grand Hotel includes the 1% Tourism levy but all other mentioned establishments exclude the 1% levy.
- Double rate = per room (rate for 2 people sharing)
- Please note, breakfast and 14% Vat is included in the rates specified above. Breakfast at the Breakwater Lodge is additional.
- Please note, the accommodation account must be settled in full by the delegate on departure.
- Check-in time is after 14:00 on day of arrival and check-out time is before 11:00 on day of departure unless otherwise stated.
- Please notify the Secretariat if you require an early check-in. Please note an early check in is subject to availability and cannot be guaranteed unless the night before is reserved and paid for.

Please complete

SINGLE	DOUBLE	ARRIVAL	DEPARTURE	NO OF NIGHTS
adults		Please indic	cate number of ch	ildren
<b>ION REQU</b>	ESTS	•		
	adults		adults Please indic	adults Please indicate number of ch

# **B. ACCOMMODATION PAYMENT**

Please complete the credit card details below for the 2 nights deposit. Please note that for reservations made at the Cullinan Hotel and the Southern Sun Waterfront Hotel (previously the Waterfront Holiday Inn), a separate Credit Card Form (click to download) must be completed for the 2 nights deposit. The completed form must be signed by the card holder and faxed to the Secretariat at

Fax +27 21 883 8177

Credit Card:	VISA											
	M	AST	ER	CAR	₹D							
Expiry Date:												
Credit Card Number:												
Last 3 digits at the back of												
credit card:												
AMOUNT:												

# **AUTHORISATION TO DEBIT THE CREDIT CARD FOR THE ACCOMMODATION**

I hereby authorise the hotel to debit my credit card for two night's accommodation per person to serve as guarantee of my reservation. I also accept the Booking procedure and Cancellation policy of the applicable hotel as indicated on the Botrytis website.

SIGNATURE:	DATE:

## **IMPORTANT**

Deadline for reservation: 20 August 2007

### **Terms and Conditions**

The hotel requires deposit payments as follows:

- Full credit card details with valid expiry date for two nights 'accommodation deposit must be given to the Symposium Secretariat in order for the hotel to guarantee the reservation.
- All reservations must be made by <u>20 August 2007</u> as the rooms will only be reserved for the Botrytis Symposium until this date. Please make your hotel reservation as soon as possible to ensure that you get the special Symposium rate.
- On check-in at the Hotel, the guests will be responsible for their own accommodation accounts.
- Each hotel will charge the delegate's credit card for incidentals on arrival eg ArabellaSheraton Hotel will charge R 500 per night for incidentals.
- On check-out, should there be any outstanding amounts on the account due to additional requirements during the stay, this is to be settled by the guest prior to departure from the Hotel.

# **Hotel Cancellation Policy**

Please refer to the specific cancellation policy of each hotel on the Symposium website.