



18-20 September 2013

| | Capetonian Hotel, Waterfront, Cape Town: |
|------|--|
| Dea | ar Council Member |
| Kin | dly complete the registration form and return to contact details listed below. |
| Full | I name: |
| Spo | ouses name: (If attending) |
| Add | dress: |
| | |
| Tel | no: Fax no: |
| E-n | nail: Mobile: |
| | |
| Do | you require assistance with any of the following services: Yes/No (in box) |
| 1 | Airport transfers |
| | Arrival |
| | Departure |
| 2 | Additional accommodation (please provide details) |
| | before council meeting |
| | after convention |
| 3 | Attending Council Meeting |
| | Thursday |
| | Friday |
| 4 | Attending Scientific Convention |
| | Saturday |
| | Sunday |
| 5 | Sight-seeing tours |
| | Thursday (19/09) |
| | Friday (20/09) |
| | Monday (23/09) |
| 6 | Flight confirmations |

Please return your responses to the following: e-mail: ajedaar@iafrica.com and imasa.wcape@gmail.com or fax: +278668484915

Jazakallah Khair

Dr Ashraf Jedaar

(Organizing Committee)

Foreign Exchange