







会议通告

由国际血浆分离协会（International Plasma Fractionation Association, IPFA）和亚太区血液网（Asia Pacific Blood Network, APBN）联合举办的“**血液和血浆制品安全和供应**”亚太区国际研讨会将于2007年5月15日-5月16日在日本京都召开。会议讨论的主要议题如下：

-  安全和供应
-  采集和检验
-  加工和生产
-  临床需要和应用
-  分析和结论
-  总结和亚太区的前瞻

诚意邀请从事该领域的各位专家、同行和相关人士参加会议。如需获得更多的研讨会信息，请访问IPFA的网站：www.ipfa.nl。如有任何疑问，请与IPFA大会秘书处联系：

Plesmanlaan 125

1066 CX Amsterdam

The Netherlands

Tel: +31 20 512 3561

Email: ipfa@sanquin.nl

期待着与您在京相会！

附件： 会议注册表
酒店预定表

大会秘书处
国际血浆分离协会

Workshop Registration Form

IPFA Workshop on “Safety and Supply of Blood and Plasma Products in the Asia Pacific Region”

15-16 May 2007, Kyoto, Japan



If you already submitted your registration form via the web site (www.ipfa.nl) please do not complete this form.

REGISTRATION *(Please tick as appropriate)*

Delegate

Registration fee

€ 275

Total

€ _____

Title & Family Name: _____

First name _____ Gender: Male Female

Institute: _____

Department & Function: _____

Address: _____

Postal code: _____ City: _____ Country: _____

Tel no: _____ Fax no: _____

E-mail: _____

PAYMENT

BANK TRANSFER: Please transfer the amount payable to account Number 54.75.16.827 at the ABN AMRO Bank, Amsterdam, the Netherlands, beneficiary: IPFA, clearly stating the participant(s) name(s) and/or registration number. IBAN code: NL83ABNA0547516827; BIC code: ABNANL2A. Payments should be made without charges to the beneficiary.

CREDIT CARD: I authorise the immediate debit of the following credit card for the above mentioned amount:

Euro/Master/Access

American Express

Visa

Card no: _____ Expiration date (mm/yy): _____ / _____

CVC / CVV / CID code: _____

Date _____ Name of card holder _____

Signature _____

AUTHORISATION

The contact details of all delegates will be listed in the workshop participants list. Please indicate below, if you do not wish to be included in this list.

I do not agree to publish my personal details on the workshop participants list.

Please inform us of any particular requirements (diet, mobility): _____

CANCELLATION PROCEDURE

Cancellations should be received by IPFA in writing **on or before 1 May 2007** and will be subject to an administration fee of € 50,-. It is regretted that no refunds will be made for registrations cancelled after this date and the full registration fee will be payable. Replacement delegates will be accepted.

Please return by fax: +31 20 512 3559, email: ipfa@sanquin.nl or air mail:

IPFA, Plesmanlaan 125, 1066 CX Amsterdam, the Netherlands, Tel.: +31 20 512 3561, Website: www.ipfa.nl

Please keep a copy for your personal records

THE WESTIN MIYAKO
KYOTO

Hotel Reservation Form
IPFA Asian Regional Workshop
15-16 May 2007

Surname: _____ First Name: _____

Company: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

- | | <u>Single use</u> | <u>Twin use</u> |
|--|---|---|
| <input type="checkbox"/> Superior Room | <input type="checkbox"/> JPY 20,500 per night | <input type="checkbox"/> JPY 21,500 per night |
| <input type="checkbox"/> Deluxe Room | <input type="checkbox"/> JPY 27,000 per night | <input type="checkbox"/> JPY 28,000 per night |

*Prices are exclusive of breakfast and exclusive of 10% service charge & 5% government tax.
Room types will be subject to availability.*

Arrival Date: _____ Departure Date: _____ No of nights: _____

Expected Hotel Arrival Time: _____:_____

- Smoking Room Non-Smoking Room

Special requests: _____

Credit Card Number: _____ Exp. Date: _____

Credit Card Type: _____

The credit card number given is to guarantee my booking and my account will not be debited until my departure.

Cancellation policy:

- Within 48 hours prior to arrival, notification in writing: free of charge
- Within 24 hours prior to arrival, notification in writing: 20% of total accommodation booked
- On day of arrival, notification in writing: 80% of accommodation booked
- No show: 100% of accommodation booked

Signature: _____ Date: _____

Please be informed that the group's reservation cut off date is 14 April 2007. Reservation forms received after this date will be subject to rate and space availability.

Please fill out this form and fax it to Ms Rieko Asahara at the Westin Miyako: +81 75 751 2490.
Should you have any questions, please contact Ms Asahara on tel.no: +81 75 771 7111 or by email:
rieko.asahara@westin.com