

KLS SC49 - PROFESSIONAL DEVELOPMENT COURSE

"Volcanology for Exploration Geologists - Key concepts and Field techniques"

Jocelyn McPhie

& Dr. Gonca Gencalioglu Kusu

Inlice, Konya, Turkey

April 11 (Saturday) to April 14 (Tuesday), 2020 (4 days)

REGISTRATION FORM

- Space is available on a first come, first served basis
- A service charge of \$100.00 (in the currency of the fee) will be levied on all cancelled registration and/or cheques returned for insufficient funds
- Cancellations: 3 or more months in advance of course start date: 100% refund; 1 to 3 months in advance: 50% is refundable. No refunds within 1 month.

Please email this form to karie@klsgeo.com OR mail it (with an email notice) to:

#319 – 130-1959 152nd Street, South Surrey, BC, V4A 0C4 (Phone: +1-604-367-8898)

Price includes: 4 full days of instruction, 4 nts double-occupancy hotel, 4 days meals, ground transportation to field sites, fuel, permits, tuition fees, site fees, course notes, and participation certificate.

Early registration (by February 28, 2020)	\$2397 USD	<input type="checkbox"/>
Late registration (after February 28, 2020)	\$2697 USD	<input type="checkbox"/>

Method of Payment:

____ **Please issue an invoice** (to pay by cheque or wire)

____ **Interac e-transfer:** (Canadian bank to Canadian bank account transfers in CAD only)

____ **PayPal:** A Paypal request for payment will be sent by email. An extra 3% fee for Canadian cards, 3.9% for US cards and an extra 4.5% for other cards, will be added when paying by credit card

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Participant: Name (*please print*): _____ Male Female

Job Title: _____ Company: _____

Citizenship: _____ Cell number active in Turkey (if available) _____

Work Email: _____ Personal Email: _____

Who to contact in an emergency (Name / Phone# with country&city codes) _____ /

City, State _____ Country _____

Please list anything we should know about a severe allergy or medical condition that you might have (if none, please write "none"):

Billing Contact: Name: _____ Job Title: _____

Company Name: _____ PO/Billing # _____

Street Address: _____

City: _____ Province/State: _____

Country: _____ Postal Code: _____

Telephone: _____ Work Email: _____