

Payment Form and Information
IUFRO Canopy Processes Workshop, October 6-13, 2006
http://people.bu.edu/nathan/iufro_info.htm

1. Review your payment option here:

Venue	Low	Medium	High
New England Center, Durham, New Hampshire	Shared double at New England Center	Single at New England Center	Single at New England Center (www.newenglandcenter.com)
Harvard Forest, Massachusetts	Shared double or triple, on-site	Shared double, on-site	Single at the Inn at Clamber Hill (clamberhill.com) or Winterwood Inn (www.lanierbb.com/inns/bb7325.html)
Black Rock Forest, NY	Multiple occupant dorm	Multiple occupant dorm	Single at Holiday Inn Express (www.ichotelsgroup.com/h/d/hi/1/en/hd/ftmny)
Fee	\$1475 (\$1375) ¹	\$1595 (\$1495) ¹	\$1895 (\$1795) ¹

¹Fees if payment is received by **June 30, 2006**.

2. Payment may be made through credit card, personal or institutional check, or money order. International wire transfers are discouraged, but if necessary, may be arranged (contact Nathan@bu.edu for information on wire transfers). A receipt will be sent after payment is received.

Credit Card: Please either phone in your credit card number to Nathan Phillips at 1-617-353-2841 or fill out and fax this form to a secure Boston University fax machine at 1-617-353-6444. (Note for international participants: the “1” listed above is the country code for the United States; immediately before this “1” you must dial your country’s exit code. For most European countries, China and Brazil, the exit code is “00”). **DO NOT EMAIL THIS FORM OR YOUR CREDIT CARD INFORMATION.**

Check or Money Order: Make checks/money orders out to Boston University, in US dollars, and write “IUFRO-2006” in the comment line. Include your name and mailing address on the check. Mail checks to:

Boston University, Department of Geography and Environment
 675 Commonwealth Avenue, Boston, Massachusetts 02215 USA
 Attention: Michael Holmes, IUFRO 2006

Refund policy: A participant may transfer reservations to another participant at any time with no penalty. Cancellations received by June 30, 2006 will receive their payment, less \$100 processing costs. Cancellations between June 30, 2006 and July 31, 2006 will receive their payment, less \$300. Cancellations after August 1, 2006 will receive no refund.

Boston University

Office of the Comptroller
Cashier's Office
881 Commonwealth Avenue
Boston, MA 02215
Phone: (617) 353-3896
Fax: (617) 353-6444



Credit Card Authorization Form

Credit Card Information:

Card Type (Check one): Visa Master Card Discover

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ / _____

Name as it appears on the card: _____

Amount of Payment: \$ _____

I hereby authorize Boston University to charge my credit card the amount specified above. I agree to pay the total credit card amount listed above according to the card issuer agreement.

Authorized Signature: _____ Date: ____/____/____

Printed Name: _____ Title (if applicable): _____