

**BOOKING FORM**  
**The Society for Old Testament Study**  
**WINTER MEETING 2012**  
COLLINGWOOD COLLEGE DURHAM

*Please tick the appropriate boxes and enter the relevant information, then send the completed form together with payment to Elizabeth Harper, Chadkirk, School Lane, Impington, Cambridge CB24 9NS. Places may be reserved by email to **eh433@cam.ac.uk** with payment to follow by post. (Please note change of email). **The form must be received by Thursday 1st December 2011; no bookings can be accepted after that date.** Electronic acknowledgements will be sent to those who supply an email address. Please book early to guarantee a residential package.*

**A. PERSONAL DETAILS**

Name (in block letters): .....

Address: .....

.....

Telephone: .....

E-mail: .....

**MEMBERSHIP** (please tick one of these):

I am a Member of the Society for Old Testament Study.

I will be representing the following Publisher at the Meeting:

.....

I am neither a Member of the Society nor a Publisher's Representative, but I provide the details of a Member of the Society (or other appropriate person e.g. Supervisor) who is willing to act as Referee for my aspiration to attend the Meeting:

Referee's Name: .....

E-mail: .....

**ADDITIONAL INFORMATION**

This is my first SOTS Meeting.

I require a receipt mailed to me prior to the Meeting and I enclose a stamped self-addressed envelope

I would like a receipt emailed to me at the above email address prior to the Meeting.

I would like a packed lunch (instead of the buffet) on Thursday 5th January (must be pre-ordered).

I would like an additional nights accommodation on Thursday 5<sup>th</sup> January (unfortunately no accommodation is possible before the meeting, but a list of B&Bs in Durham is available on request).

I have the following special requirements (e.g. dietary constraints e.g. vegetarian/ kosher, mobility difficulties etc.):

Please book me for the **Tour of Durham Cathedral** with attention to OT/HB allusions led by the Dean on Wed 2pm (Places are limited to the first 60 bookings although a reserve list will be created)

**B. PARTICIPATION DETAILS**

*In the prices listed here the first figure (italics) is the discount price for bookings received by Wednesday 9<sup>th</sup> November 2011. Bookings received between Thursday 10<sup>th</sup> November and Thursday 1<sup>st</sup> December will be subject to the second price listed. No bookings can be accepted after the latter date.*

**PACKAGE PRICE**

- Resident Package Price En-suite Room (shower and toilet) ..... £130.00 / £143.00  
All meals, sessions and accommodation in room with small private bathroom facilities.
- Resident Twin Package Price En-suite Room (shower and toilet)..... £250.00 / £275.00  
All meals, sessions and accommodation in room with small private bathroom facilities for 2.  
The room is to be shared with:
- Low Income Resident Package Price ..... £85.00 / £93.50  
*The Low Income package rate is for members of the Society (or graduate students seriously considering membership) who are on minimal incomes, or from disadvantaged countries. Those claiming this package will be invited to help with minor duties during the Meeting. Accommodation may be in a standard room with shared bathroom facilities*
- Non-resident Package Price: ..... £70.00 / £77.00  
This includes all sessions, lunches, dinners, tea and coffee but no accommodation
- Sessions only Package Price: ..... £20.00 / £22.00  
This includes all sessions, tea and coffee but no accommodation or meals
- Additional B&B on night of Thursday 5<sup>th</sup> January: ..... £31.00 / £33.00

**ITEMIZED PRICES** (for those not taking the package)

Itemized prices are available for those unable to stay for the whole package. Please email your requirements to [eh433@cam.ac.uk](mailto:eh433@cam.ac.uk) for individual pricing. Please list your requirements here:

Total itemised cost as advised by Hospitality Secretary: £

**C. PAYMENT DETAILS**

*Please pay by cheque made payable to 'The Society for Old Testament Study' (credit-card payments create extra costs, and the facilities are provided for members without British cheque accounts). Please pay the full amount if possible but, if necessary, a non-returnable booking fee of £30 will be accepted with the balance payable by cheque or cash on arrival.*

- I enclose a cheque for £....., being the full amount for ..... person(s), in accordance with the options I have selected in Section B.
- I am unable to pay at this time the full amount for the options I have selected in Section B, and so I enclose a cheque for £....., being the booking fee for ..... person(s).
- I cannot pay by British cheque so please charge my credit card £..... (= the total in Section B + **£1 handling charge**), being the full amount for ..... person(s).

Card number 

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Expiry date 

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 Security Code: 

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 MasterCard  Visa

Print name as it appears on card: .....

Cardholder's address:

.....

Signature: ..... Date: .....