**Hotel Questionnaire**

**BENZON SYMPOSIUM No. 62**

**Genome Instability and Neurodegeneration**

**Copenhagen, August 22-25, 2016**

|  |  |
| --- | --- |
| **Last name:** | **First name(s):** |
| **Full postal address (work):** | |
| **Phone:** | |
| **E-mail:** | |
| **Expected date and time of arrival**: | |
| **Expected date and time of departure**: | |
| **Accommodation:** | Single room / Double room |
| **Name of accompanying person (spouse):** | |
| **Name and age of accompanying children:**  *If further arrangements (e.g. extra beds/extra room for children) are needed, please indicate your wishes, but note that the Foundation does not cover the expenses of accommodation for accompanying children.* | |
| **Other comments (including dietary comments):** | |

**Social activities (*indicate NUMBER of participants*):**

|  |  |  |
| --- | --- | --- |
| Monday | Reception at Café Mazzolis in the old amusement park *Tivoli*, (for all speakers, participants and accompanying persons) |  |
| Wednesday | Banquet at the Banquet Hall at the University of Copenhagen (for all speakers, participants and spouses) |  |

**RETURN as soon as possible** to:

Leila Majdanac, The Alfred Benzon Foundation, C/O Copenhagen University, Faculty of Health and Medical Sciences, Universitetsparken 2, DK-2100 Copenhagen, Denmark

**E-mail: mail@benzon-foundation.dk**