

CANCELLATION & REFUND POLICIES

Date		Order #	
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CONTACT DETAILS

Attendee Name	
Requested By	
Organization Name	
Email	
Phone	

REASON FOR REFUND (Circle One)

Conflict

Medical

Financial

Personal

Other

Please also provide a detailed explanation below as to why you were unable to attend the conference. Attach any relevant documentation.

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REFUND INFORMATION – FOR OFFICE USE ONLY

Person Requesting							
Authorized By							
Check		CC		Wire		Amount	

PLEASE NOTE

Your refund is subject to approval. Please return this form to Member Operations memberoperations@inta.org, or fax it to +1-212-768-7796 (Attn: Member Operations). Please allow 3-5 business days for processing.