



REGISTRATION FORM

Teratology Society 43rd Annual Meeting
June 21–26, 2003 • Philadelphia, Pennsylvania

For Office Use Only

Date Received: _____

Input: Initials: _____

Member Non-Member (Please check the appropriate box)

Please print or type:

Name: _____

Affiliation: _____ Is this a new employer?
 Yes No

Department: _____

Street Address: _____ Is this a new address?
 Yes No

City/State/Zip/Country: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____

Advance Registration Fees (Until May 15):

Full Attendance:

- Member \$250
- Graduate Student/Post-Doctoral Fellow
(Member/Non-Member—please circle one) \$120
- Non-Member \$475*
- Accompanying Adult (List names at right.) \$225
- Adult Guest—Banquet Ticket Only \$ 70
- Child—Banquet Ticket Only \$ 35
- PAC Workshop Only \$100

Single-Day Attendance: (Day _____)

- Member \$175
- Graduate Student/Post-Doctoral Fellow
(Member/Non-Member—please circle one) \$ 75
- Non-Member \$250

Total Amount Due: \$ _____

Name of Accompanying Person(s)

Education Course (Until May 15):

- Member \$235
- Non-Member \$285
- Graduate Student/Post-Doctoral Fellow \$ 50

Mini-Course (Until May 15):

- Member \$ 35
- Non-Member \$ 65
- Graduate Student/Post-Doctoral Fellow \$ 15

Mutter Tour (Until May 15):

- Tour Fee \$ 20

∨ **Late Registration Fee (after May 15, 2003): add \$50.**

∨ **Deadline for Pre-Registration: June 1, 2003.**

(After June 1, you must register on-site. On-site Registration Forms will be available at the Registration Desk.)

There is a \$20.00 charge for cancellation of the Education Course or meeting Registration before May 15, 2003. No refunds after May 15, 2003.

* Includes first-year membership dues if an application is received during the annual meeting or is submitted with the Registration Form. Membership Applications can be downloaded from the Teratology Society Website (<http://teratology.org>).

Method of Payment:

Please make all checks or credit charges payable to the Teratology Society in U.S. currency.

Government Purchase Order #: _____ (Government P.O. Form must be attached.)

Check or Money Order #: _____ MasterCard Visa AMEX Discover

Credit Card#: _____ Expiration Date: _____

Signature: _____ Cardholder's Printed Name: _____

If cardholder is different from registrant, please include cardholder's telephone number: (_____) _____

Mail completed form with remittance to: Teratology Society, Meeting Registration, 1767 Business Center Drive, Suite 302, Reston, VA 20190-5332.
Fax (Credit Card Payments ONLY): (703) 438-3113. Government purchase orders may not be faxed; they must be mailed with the Registration Form.