

This form may be copied for EACH name.

The deadlines for the registration are determined by the postmark:

After Friday Nov-21-08, add Late Registration charge of \$50.

After Friday Dec-12-08, cancellations are subject to a \$50 charge.

After Friday Jan-02-09, cancellations are subject to forfeiture of all fees.

2009 Registration Form

Conference attendance is limited to 650

1. FIRST and LAST name: _____ Affiliation: _____

2. Mailing Address: _____ E-mail: _____

Phone: (____) _____

Male () Female () Vegetarian, how many? () Disabled () All buildings are designated as non-smoking

3. FULL name of roommate(s) or guest(s): _____

Roommate: Another person who is also registered to attend the conference.

Guest: Spouse/other adult attending evening receptions but NOT the meeting sessions.

4. CHILDREN: name/age Crib? (): _____

HOUSING: The total cost PER PERSON covers housing and meals from 3:00 pm, Saturday, January 24th through Tuesday, January 27th, including lunch. * PLEASE NOTE: Historic housing is limited.

	SINGLE	DOUBLE	MULTIPLE	YOUTH (age 3-17) No charge under age 3
*Historic Housing	\$505	\$350	\$277	\$250
Standard Housing	\$627	\$400	\$327	\$250

REGISTRATION: Use guest column ONLY if a Guest is entered on line 3 above.

	ASILOMAR HOUSING			OFF-GROUNDS HOUSING		
	Postdoc/Graduate & Undergraduate Students	Others	Guest	Postdoc/Graduate & Undergraduate Students	Others	Guest
Registration	\$75.00	\$200.00	\$20.00	\$75.00	\$200.00	\$20.00
Housing	\$	\$	\$	xxx	xxx	xxx
Facility Fee	Included			\$50.00	\$50.00	\$50.00
Meals – Adult Meals – Child (3-12)	Included			Meal Ticket \$112 (Child) \$ 87	Meal Ticket \$112 (Child) \$ 87	Meal Ticket \$112 (Child) \$ 87
Add Late Reg. Fee (after Nov-21-2008)	\$50.00	\$50.00	xxx	\$50.00	\$50.00	xxx
Column Totals	\$	\$	\$	\$	\$	\$
Contribution to MCI to support the conference (tax deductible)				Contribution: \$ _____		
Checks payable to: MIDWINTER CONFERENCE OF IMMUNOLOGISTS				GRAND TOTAL: \$ _____		

Forward your check with student support letter (if applicable, see below) and the original of this form to Kim Gurney, Registrar, P. O. Box 4181, Foster City, CA 94404. Phone: (650) 571-8367 (Pacific Time).

E-mail address: kim.gurney@byu.net. (Fax: Unavailable. Call first for FedEx delivery).

Do you prefer your Confirmation by e-mail ()? OR by U.S. mail ()?

BOX LUNCH REQUESTS will be accepted for Tuesday, Jan 27th only (# _____).

“TO-GO” OPTION - An attendee may pick-up a lunch from the dining room – no reservation required.

A letter must accompany each registration form for the following categories only. A group letter will not be accepted.

Postdoctorate: () Letter signed by sponsor outlining area of study & a copy of University ID.

Graduate Student: () Same as above and a copy of graduate student ID card.

Undergrad. Student: () Letter signed by sponsor indicating benefit of attendance.