

24th Annual International Gravitational Physiology Meeting
4 - 9 May, 2003, Santa Monica, CA

Registration Form

Air Mail or fax by 1 March, 2003 to:

V. Reggie Edgerton
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Email: vre@ucla.edu

(PLEASE PRINT OR TYPE)

Family Name _____ First Name _____

Institution _____

Mailing Address _____

City _____ State _____

Zip/Postal Code _____ Country _____

Telephone _____ Fax _____

E-mail Address _____

Preferred means of communication: Fax Email (Registration must include at least one of these)

- | | | |
|---|-------------|---|
| <input type="checkbox"/> Registrant (before 1 March, 2003)- | \$250 USD | <input type="checkbox"/> Attend Welcome Reception |
| <input type="checkbox"/> Registrant (after 1 March, 2003)- | \$300 USD | <input type="checkbox"/> Attend Gala Dinner |
| <input type="checkbox"/> Student
(Please provide verification of student status) | - \$75 USD | <input type="checkbox"/> Attend Regional Tour |
| <input type="checkbox"/> Guest Registrant | - \$125 USD | |

Guest Name(s): _____

Please indicate by ✓

I(We) have sent the certified bank check or personal check to Dr. Edgerton at the address above.

I(We) have remitted the grand total of \$ _____ USD, on _____ (date) through my bank _____ (name of bank) to the account on the next page.