

## **REGISTRATION FORM**

MMB 2009 CONFERENCE April 1 – 3, 2009 Québec City, QC, CANADA

Region:	Americas 🗆	Europe/Africa □		Asia/Oceania 🛚			
Institution:	Government □	Government Lab □	Industry□	Self-Employed □	University □		
First/Given Nam	ne:		Last/F	amily Name:			
Preferred First N	Name on Name Ta	g:	Degre	e:			
Position:							
Organization:							
Department:			Divisio	on:			
Street:							
				stal Code:			
State:							
Phone No.:			Fax N	0.:			
Email:							
Classification:	Conference Pre			Paper No.			
	at least one author ha	as to register for each paper in or er.	rder to publish it in	the conference proceedings a	and the final program. For this		
Name on electro	onic mailing list to	be available to commercial s	upporters and co	nference attendees: Yes	□ No □		
Email included	on Participant's Lis	t for all attendees? Yes □	No □				
If you require sp	ecial arrangemen	s, please indicate your reque	est below:				
Dietary:			Physic	cal:			
How did you he □ Promotional I		2009 Conference? ☐ Previous Confe	erence	☐ Word of Mou	uth		
☐ Promotional I	Flyer	☐ Conference We	ebsite	☐ Internet Sea	rch		
Conference F	FEE	Early Bird On or Before	Advanced March 1 to	On Site After			
	_	February 28, 2009	March 20, 200	9 March 21, 200			
□ Participant		\$600	\$700	\$800	\$		
,	h confirmation*) udent Advisor's Na	\$300 nme:	\$325 	\$350	\$		
DAILY CONFER	ENCE FEE						
		Registration Rate per Day	Number of Da	ys Which Days?			
☐ Participant		\$375	Х		\$		

Pre-registration will close on March 20, 2009. After March 20, 2009, all prospective attendees will register on-site at the standard rate. Please bring this registration form with payment to on-site registration.

Registration payment, in **US Dollars (USD) only**, is due within 10 days of receipt of your registration. Registration is not valid or complete until payment is received unless other arrangements are made. The registration fee includes program material, (1) soft-copy conference proceedings (electronic version), welcome reception, banquet, lunches, refreshment/coffee breaks, and a 20% non-refundable cancellation fee. A \$50 fee will be charged for all substitutions. All requests for refunds must be received in writing no later than March 20, 2008. No refunds will be made after this date. **PLEASE NOTE:** The Thursday Evening Conference Banquet IS NOT included in the price of a daily registration.

## ADDITIONAL GUEST MEAL TICKET

Cost per ticket: \$175	No. of tickets:		Total \$
Name of Guest (if applicable)			
		Grar	d Total \$
PAYMENT			
□ Bank Wire Transfer (bank wire transfe	r information will be sent via email to you	upon receipt of this fo	orm)
☐ Check/Money Order – Make checks page	ayable to: MMB 2009 Conference		
☐ Credit Card Payment (circle one):	VISA N	lasterCard	American Express
Card No.:			
	Verification Code (a 3 digit number or		your card):
Exp. Date (MM/YY):			
Name of cardholder:	· · ·		
Name of cardholder:Cardholder signature:			
Name of cardholder:  Cardholder signature:  Billing address:			
Exp. Date (MM/YY):			

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