REGISTRATION FORM

Dynamics of Complex Systems Workshop
Fairbanks, Alaska March 8-12, 2010

Deadline February 19, 2010

Please complete & return to:

UAF Dynamics of Complex Systems Workshop c/o Karina Possenti, 210 Chapman Bldg. / PO Box 756670
Fairbanks, AK 99775 Phone: 907-474-5151 Fax: 907-474-5030 Email: fyccss@uaf.edu

Name _____

Affiliation/Institution _____

Mailing Address _____
(for receipt)

_____

_____

Phone _____ Fax _____

Email address _____

Meeting Registration (check all that apply)

☐ Faculty/Staff/Other $50 ☐ Student $15	
☐ I plan to attend the conference dinner (included in reg. fee)	☐ I will bring a guest to dinner (Add $25)
☐ I would like to submit an abstract for this conference *(Email abstract to fyccss@uaf.edu – indicate oral/poster & any special requirements. **Deadline 2/19**)*	

Payment

$_____ Conference Registration (Faculty/Staff/Other $50, Student $15)

$_____ Dinner Guest: $25

☐ Check # _____
☐ Department Charge Fund/Org _____ Contact: _____
☐ Credit card *(complete form below)*

Credit Card Payment

CHARGE WILL APPEAR AS "UAF BUSINESS OFFICE" ON YOUR CREDIT CARD STATEMENT

Total authorized to be charged to card $ _____

Type of card ☐ Visa ☐ Mastercard

Card Number _____ Exp. Date _____

Cardholder's Name
(please print) _____ V Code _____

Cardholder's Address
(card billing address) _____
Street or PO Box Number

_____
City State Zip

Cardholder's Phone _____

Cardholder's Signature _____