

REGISTRATION

Name _____

Institution/Department _____

Address _____

City _____ State/Province _____ Country _____ Zip/PC _____

Business Phone _____ Fax _____

E-mail _____

Emergency Contact _____ Phone _____ Evening _____

Member Affiliation HeSCA ABCD IMI BCA Non-member First Time

	PREREGISTRATION (before June 6th)	REGISTRATION (after June 6th)
Member	\$495	\$595
Nonmember	\$595	\$695
Student/Retired	\$395	\$395
ABCD Dinner Guest	\$65	\$70
Spy Museum (Thursday eve.)	\$50	\$55
Extra Banquet Ticket	\$70	\$80

WORKSHOPS / FIELD TRIPS

Please select one for each category

- | | | |
|---|--|--|
| <input type="checkbox"/> FRIDAY P.M.
<input type="checkbox"/> NLM and Lister Hill

<input type="checkbox"/> ABCD Retreat | <input type="checkbox"/> SATURDAY A.M. WORKSHOP
<input type="checkbox"/> Creating Accessible and Usable Web Sites
<input type="checkbox"/> Biomedical Communications in Digital Imaging Management | <input type="checkbox"/> SATURDAY P.M. TRIP
<input type="checkbox"/> Holocaust Museum

<input type="checkbox"/> Smithsonian |
|---|--|--|

BANQUET MEAL

FOR YOU*/GUEST**, WRITE NUMBER IN BOX

*INCLUDED IN FULL REGISTRATION; **ADDITIONAL TICKET, \$65

- Rosemary Chicken Vegetarian Not attending

ADD IT UP

Meeting Registration = _____
ABCD Dinner Guest = _____
Spy Museum/Dinner = _____
Extra Banquet Ticket = _____
TOTAL = _____

mail to:

Health & Science Communications Conference

c/o HeSCA
39 Wedgewood Drive, Suite A
Jewett City, CT 06351-2528

Phone 860.376.5915

Fax 860.376.6621

E-mail hesca@hesca.org

PAYMENT

Payment in US dollars may be made by check, MasterCard, Visa, Discover, American Express, or Purchase Order. If payment is made by credit card or purchase order you may fax your registration to HeSCA headquarters.

- VISA MC Discover American Express
 Purchase Order No. _____

Name on Card _____

Card No. _____
(VISA - 3 digit code on back)

Expiration Date _____

Signature _____

*Cancellations before June 6 are subject to a \$50 cancellation fee.
No refunds will be made after June 6.*

Special needs: HeSCA and ABCD are committed to compliance with the Americans with Disabilities Act (ADA). Participants who require assistance must notify HeSCA in advance of the meeting. Every reasonable effort will be made to accommodate meeting needs. Hotel facility needs are the responsibility of the Washington Marriott Hotel.

HeSCA and ABCD are 501(c)3 non-profit associations / HeSCA FIN: 56-6068234

For more information, contact
www.hesca.org or 860.376.5915