

Dipterists Society

REGISTRATION _____ FIELD MEETING



Member ID:
Surname:
Given name(s):
Institution (if applicable):
Mailing address:

Date:

City:
Postal Code:
Telephone (including country & city codes):
Email address:

State/Province:
Country:

Registration option		Amount		Society member Amount
Regular Registration (to April 1)	<input type="checkbox"/>	\$100.00	<input type="checkbox"/>	\$80.00
Student Registration (to May 20)	<input type="checkbox"/>	\$50.00	<input type="checkbox"/>	\$40.00
Late Registration (April 2 to May 20)	<input type="checkbox"/>	\$200.00	<input type="checkbox"/>	\$180.00
Lodging (* check preference below)	<input type="checkbox"/>	\$200.00	<input type="checkbox"/>	\$200.00
Meal plan (** select below, indicate amount)	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Optional Field Meeting sponsorship?	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Optional Charitable Donation to the Society	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
GRAND TOTAL		\$		\$

* Lodging preference:

- No preference
- Single occupancy preferred
(if available will incur \$25 charge)
- Couple only, shared double bed
(if available will incur \$100 charge)

Meeting Activities planned:

- Collecting only
- Giving a presentation
- Presenting a poster

Transportation:

- Will rent a vehicle
- Have transportation
- Need transportation

** Meal plan:

- Full (breakfast, lunch, dinner) \$170
- Breakfast/lunch only \$100
- Breakfast/dinner only \$125
- Lunch/dinner only \$125
- Breakfast only \$50
- Lunch only \$50
- Dinner only \$75
- None

Dietary restrictions:

Make check or money order payable to: "Dipterists Society"

MAIL TO: Dipterists Society
Attn.: Treasurer
P.O. Box 231113
Sacramento, California 95823, USA

**THANK
YOU!**