



September 2-4, 2008 • Loma Linda, California

## REGISTRATION FORM

NAME		SALUTATIONS ___ DR.    ___ MR.    ___ MRS.    ___ MS.	
MAILING ADDRESS			
CITY	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY
E-MAIL ADDRESS		PHONE NUMBER	
ORGANIZATION			
<b>CONTINUING PROFESSIONAL EDUCATION</b>			
<input type="checkbox"/> BRN      License Number _____		<input type="checkbox"/> CHES      License Number _____	
<input type="checkbox"/> Other      License Number _____		<input type="checkbox"/> Other      License Number _____	
<b>REGISTRATION FEES</b>			
	EARLY REGISTRATION ENDS JUNE 30, 2008	FULL REGISTRATION BEGINS JULY 1, 2008	
<input type="checkbox"/> Full Symposium (Tuesday, Wednesday, Thursday*)	<input type="checkbox"/> \$385	<input type="checkbox"/> \$450	_____
<input type="checkbox"/> One Day Only. Please Specify Date _____	<input type="checkbox"/> \$200	<input type="checkbox"/> \$250	_____
<input type="checkbox"/> Full Time Students/Fellows/Post Doctorial*	<input type="checkbox"/> \$175	<input type="checkbox"/> \$225	_____
<input type="checkbox"/> Short Oral/Poster Presenters*	<input type="checkbox"/> \$325	<input type="checkbox"/> \$450	_____
<input type="checkbox"/> Dinner Ticket for additional Guests # attending _____	<input type="checkbox"/> \$30/person	<input type="checkbox"/> \$40/person	_____
<b>TOTAL</b> * 3 Days, Includes CE and Dinner			
<b>CANCELLATION POLICY</b>			
Cancellation request for refund must be sent in writing to Venice Brown at vbrown@llu.edu. An administrative fee of \$50 will be applied. Refunds will be sent after the Congress is concluded. You may send someone in your place at no extra charge. Please contact Venice Brown for this option.			
<b>METHOD OF PAYMENT</b>			
<input type="checkbox"/> CHECK <input type="checkbox"/> VISA <input type="checkbox"/> DISCOVER <input type="checkbox"/> MC		CREDIT CARD NUMBER	EXPIRATION DATE
SIGNATURE		V-CODE	TOTAL CHARGES
<b>MAILING INFORMATION</b>		<b>FAX: (909) 558-0182</b>	
Venice Brown 25 <sup>th</sup> ICPAFR Symposium Loma Linda University School of Public Health Continuing Professional Education 10970 Parkland Street, Loma Linda, CA 92354, USA		<b>PLEASE MAKE CHECKS PAYABLE TO:</b> Loma Linda University School of Public Health	