



STUDENT REGISTRATION FORM

Name: _____

College/University _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Undergraduate student Graduate student Post-doctorate student

Specific area of academic interest: _____

Registration: Student registration is \$175 if paid by Aug. 31, 2010. Beginning Sept. 1, the fee will be \$200. Registration includes continental breakfast, lunch and the symposium reception on Sept. 23, a breakfast buffet on Sept. 24, and coffee breaks both days. Return this form with a check payable to Farm Foundation, to: Zoonoses Symposium, Farm Foundation, 1301 W. 22nd St., Suite 615, Oak Brook, IL 60523 Fax: 630-571-9580. Or, if paying by credit card, registration can be completed on-line, at the Farm Foundation Web site:

www.farmfoundation.org.

NOTE: Refunds will be made only if the registration is canceled by close of business Wednesday, Sept. 15, 2010.

Hotel rooms: Symposium participants are responsible for making their own hotel reservations. A block of sleeping rooms has been reserved at the Grand Hyatt Hotel, 1000 H Street NW, Washington, D.C. Hotel reservations can be made by calling (202) 582-1234 or 800-233-1234. The symposium room rate of \$209 per night, single or double occupancy, is available only for reservations made by Aug. 25, 2010.

Personal Contact Information provided above will be distributed as an attendee list to all event participants. If you do not want your information included, please indicate here. The list would then include only your name, affiliation, city and state. _____

