1999 AAPM Summer School Registration Form

Return completed registration forms with full payment by May 15 to: AAPM, P.O. Box 630554, Baltimore, MD 21263-0554 �� Credit card payments only may be faxed to 301-209-0862.

Register by April 30 to receive reduced registration fees. This form must be received at AAPM Headquarters by May 15 to pre-register. After May 15, only on-site registration will be available. Registration forms received by the May 15 deadline will be acknowledged by mail. No refunds will be given for cancellations received after May 15. Register with credit card information on-line today through AAPM's SECURE server at http://www.aapm.org

SCIENTIFIC REGISTRANT																							1
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SCIENTIFIC REGISTRATION – Includes tickets to the Icebreaker, Night Out, Proceedings and T-shirt.	FEE	TOTAL		
Discounted AAPM Member Rate Discounted thru April 30	С	DM	\$695	\$
Discounted International Rate Discounted thru April 30 Member - Partnership in National Medical Physics Organization Resident - Developing Country (s	- I	DI	\$695	\$
Non-AAPM Member Discounted Rate Discounted thru April 30	С	DN	\$970	\$
AAPM Member Regular Rate AFTER April 30	R	RM	\$795	\$
International Regular Rate <u>AFTER April 30</u> Member - Partnership in National Medical Physics Organization Resident - Developing Country (s	I -	RI	\$795	\$
Non-AAPM Member Rate <u>AFTER April 30</u>	F	RN	\$1,070	\$
	TOTAL	\$		

OPTIONAL TICKETS		FEE	TOTAL		
Parking Pass for the week	PK	—×\$9	\$		
Tuesday Afternoon Winery Tour (includes all entrance fees and tickets to the wineries)	TT	x \$55	\$		
OPTIONAL TICKETS TOTAL					

HOUSING REGISTRATION – Meals included. See descriptions under "Lodging and Meals."		WEEKLY RATE	TOTAL
Single room , shared bathroom and living area	SR	\$260	
Extra night – for those wishing to stay Thursday night, check out by 11 am on Friday, July 2	LS	\$34	
Twin bed, shared room, shared bathroom and living area	TS	x \$200	
Extra night – for those wishing to stay Thursday night, check out by 11 am on Friday, July 2	LT	\$23	
Children, Ages 5 - 13 (will have twin bed)	СТ	x \$200	
Extra night – for those wishing to stay Thursday night, check out by 11 am on Friday, July 2	LC	\$23	<u> </u>
Children, Age 4 and under (no bed)	CF	FREE	
ARRIVAL DATE: DEPARTURE DATE:			
HOUSIN	G REGIS	STRATION FEES TOTAL	\$
Roommate Request: If you would like to share a room with a particular registrant (other than companions), Name:	please ir	ndicate here:	
COMPANION REGISTRATION ALL COMPANIONS MUST REGISTER FOR THE MEETING & PAY THE APPROPRIATE REGISTRATION FEE LIS COMPANIONS ADULTS 14 YEARS & OVER ast Name Nick Name for CHILDREN AGES 5 - 13 AST Name Nick Name for CHILDREN AGES 4 and under AST Name Nick Name for	Badge Badge Badge Badge	OW TO ENTER THE COMPA	Gender M/F Gender M/F Gender M/F Gender M/F Gender M/F TOTAL \$ \$
Child Weekly Ages 4 and under		4@ N / C	\$
COMPANION	REGISTE	RATION FEES TOTAL	\$
PAYMENT		TOTAL	<u> </u>
SCIENTIFIC REGISTRATION FEES OPTIONAL TICKETS HOUSING REGISTRATION FEES COMPANION REGISTRATION FEES CHECK drawn on U.S. bank, payable to AAPM MasterCard Visa AMEX Signature		\$ \$ \$ \$	
Credit Card Number Expiration	Date	\$	<u> </u>

Registrations will not be processed until full payment is received. Send completed form with payment to: AAPM, P.O. Box 630554, Baltimore, MD 21263-0554