

2003 MUACC REGISTRATION FORM

Indiana University Purdue University Indianapolis, Indianapolis, IN

9-11 October 2003

<http://www.chem.iupui.edu/muacc/>

Registration Fee

\$40 if received before September 12

\$50 if received after September 12

Name: _____

Institution / Organization: _____

Title / Position: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Telephone: _____ Fax: _____

If you would like to make a presentation, please enter a title:

I wish to be paired with a roommate
 I do **not** plan to attend the banquet
 I do **not** plan to attend the Lilly reception

REGISTER IN ONE OF THREE WAYS:

(Make **checks payable** to *Indiana University*)

1. **E-mail*** this MS Word document as an attachment to: *msamide@butler.edu*
2. **Fax*** this form to (317) 940-8434
3. **Mail** this form with payment to:
*MUACC, c/o Dr. Michael Samide
Department of Chemistry
Butler University
Indianapolis, IN 46208*

Registration amount:

Before September 12: \$40

After September 12: \$50

Additional Banquet Guests: \$30/ea _____

TOTAL

*** IF YOU REGISTER VIA E-MAIL OR FAX
YOU WILL NEED TO PAY THE
REGISTRATION FEE BY CHECK SO
THAT IT IS RECEIVED BY 9/12/03.**

Do you have any special needs or dietary considerations:

What one specific question or concern do you have with regard to teaching analytical chemistry?

- The onsite registration cost will be \$50. Onsite payment can be cash or check.
- Cancellation policy: Written notice must be received on or before October 1 to receive a partial refund of your registration.
- E-mail confirmation will be sent to all registrants. If you do not receive a confirmation by September 26, please phone Michael Samide at 317-940-9973 or email *msamide@butler.edu*.