2006 CU-ROCHE COLORADO SYMPOSIUM
ON SYNTHETIC ORGANIC CHEMISTRY

Symposium Registration Form
June 7-9, 2006

Name: _____
Last First
Affiliation: _____
Address: _____
City, State, Zip: _____, _____, _____
Country: _____
Telephone: ( ) _____ Fax: ( ) _____
E-mail address: _____

Please check appropriate fee(s)
****Note: There can be no partial payments****

Fees: Participants: (Academic/Government)

____ $150.00 if paid by May 12, 2006

____ $175.00 if paid after May 12, 2006

_____I would like to present a Poster (4' x 4')

_____I will attend the Dinner, Thursday, June 8

_____ Additional family members who will attend Dinner, June 8
PLEASE NOTE there is an additional charge of $30 per person

Fees: Participants: (Private Company)
____ $350.00 if paid by May 12, 2006

____ $375.00 if paid after May 12, 2006

Fees: Students
____ $20.00

REGISTRATION FEES MUST BE PAID PRIOR TO OR AT THE TIME OF REGISTRATION.
PURCHASE ORDERS WILL NOT BE ACCEPTED FOR PAYMENT.

Foreign participants must pay with bank drafts drawn from US banks in US dollars.
Personal checks can be accepted only if drawn upon US banks in US dollars.

Enclosed is $_____ for 2006 CU – ROCHE COLORADO Symposium

Please charge my credit card:
Charge $_____ for 2006 CU – ROCHE COLORADO Symposium

VISA _____ MasterCard _____ Diner's Club _____

Account Number: _____
Expiration Date: _____
Print name as it appears on card: _____
Signature: _____