



**REGISTRATION FORM FOR THE 30<sup>TH</sup> ANNUAL MEETING OF THE  
AMERICAN SOCIETY OF PRIMATOLOGISTS**

**WINSTON-SALEM, NC – JUNE 20-23, 2007**

(To register online go to [www.asp.org/asp2007](http://www.asp.org/asp2007). This form is for mail-in registration only.)

NAME (as it will appear on name tag); \_\_\_\_\_

ADDRESS: \_\_\_\_\_

AFFILIATION (for name tag): \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-mail: \_\_\_\_\_

**SPECIAL NOTE: REGISTRATION INCLUDES CONTINENTAL BREAKFASTS, COFFEE BREAKS,  
& THE CLOSING BANQUET.**  
Please note registration fees increase after January 12. Registration fees are NOT refundable.

MEMBERSHIP STATUS (Check One)	<u>BEFORE/ON JAN 12</u>	<u>AFTER JAN 12</u>	<u>[ON SITE]</u>
Regular member	\$230 [ ]	\$275 [ ]	[\$330]
Student member*	\$160 [ ]	\$185 [ ]	[\$215]
*Must be a current student member of ASP			
Seeking Student travel AID: <input type="checkbox"/>			
Faculty Advisor's Signature _____			
Non-member	\$290 [ ]	\$340 [ ]	[\$395]
Guest (attends social events only)**	\$145 [ ]	\$165 [ ]	[\$195]

Guest Name as it will appear on name tag \_\_\_\_\_

Affiliation (optional) \_\_\_\_\_

**TOTAL REGISTRATION FEE:** \$ \_\_\_\_\_

T-Shirt (\$15 EACH Circle size: Small Medium Large X-Large) \$ \_\_\_\_\_

**TOTAL ENCLOSED** \$ \_\_\_\_\_

**REGISTRATION PAYMENT OPTIONS:**

➤ CREDIT CARD  Visa  MasterCard  Discover Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

Voluntary contribution to cover credit card processing fees (3.5%) \$ \_\_\_\_\_

**TOTAL CHARGE TO CREDIT CARD:** \$ \_\_\_\_\_

➤ CHECK OR MONEY ORDER (make checks payable to ASP) \$ \_\_\_\_\_

ARE YOU SUBMITTING AN ABSTRACT AS PRESENTING AUTHOR?  YES  NO

ABSTRACT TITLE \_\_\_\_\_

Banquet meal will be buffet style, with vegetarian options

	<i>Veg</i>	<i>Non</i>
Opening Reception		
Closing Banquet		

Other Conference Options:

	<i>Yes</i>	<i>No</i>
Campus tours – Saturday, June 23 in the afternoon (time TBA)		

To help the Local Arrangements Committee plan their resources, please indicate your preferences (to the best of your knowledge).

<p><b>ALL MATERIALS SHOULD BE MAILED TO:</b></p> <p>Matthew Novak Laboratory of Comparative Ethology National Institute of Child Health and Human Development P.O. Box 529 Poolesville, MD 20837</p>	<p><b><u>POSTMARK DEADLINE:</u> January 12, 2007</b></p> <p><b>Remember: Make your hotel reservation early! See lodging information on the Meeting Site and Accommodations sheet.</b></p>
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