Office Use Only	
Check Rec'd	$_____
Registration	$_____
Lodging	$_____
Meals	$_____
Tours	$_____
Total	$_____

REGISTRATION FORM

Please fill out a form for **each** person registering. This form may be duplicated. Your name badge will contain your name, city, state, and major field as printed below on the left:

Name:_____ Mailing Address: _____

City:_____State:_____ City:_____State:_____Zip:_____

Major field:_____ E-mail:_____

Telephone: (_____)_____-_____

Registration Fees (per person): No refunds after July 1, 2001.

	Registration fee through June 1, 2001		Registration fee after June 1, 2001	
ASA Member	$175	$_____	$190	$_____
Non-Member	$200	$_____	$215	$_____
Full-time Student	$ 85	$_____	$100	$_____
Spouse/Family Member	$ 85	$_____	$100	$_____

Registration Total $_____

Lodging at Kansas State University: ☐ Thurs ☐ Fri ☐ Sat ☐ Sun ☐ Mon

Single occupancy is $28 per night: $28 x _____ =
One person only, no private bathrooms — No. of nights

Double occupancy is $20 per person, per night: $20 x _____ =
Two people only, no private bathrooms — No. of nights **Lodging Total $_____**

Meal Packages at Kansas State University

1. Thursday dinner through Monday lunch: $110
   (Does not include Friday lunch)
2. Friday dinner through Monday lunch: $ 97
3. Saturday breakfast through Monday lunch: $ 72

Meal Package # _____ **Meal Total $_____**

A parking permit is required to park on campus Monday through Friday at a cost of $1.00 per day (weekends free). All registrants who bring a vehicle on campus (regardless of lodging) will need a parking permit.
I will require parking for: Thursday _____; Friday _____; Monday _____. **Parking Total $_____**

Babysitting will be provided for a modest fee during **plenary talks** only. # of children ___; ages _____

TOURS: Reservations required by June 1, 2001. **Sorry, no refunds.**

		# Attending	
Land Institute in Salina, transportation and lunch included:	$25.00	_____	$ _____
ACG field trip, transportation included:	$ 6.00	_____	$ _____
ACB hiking tour of the Konza Prairie, transportation included:	$ 6.00	_____	$ _____
Sunset Zoo, admission: adult (13+), $1.50;		_____ (adults)	
child (5–12), $.75; under 5, free		_____ (children)	$ _____

TOTAL AMOUNT ENCLOSED $ _____

Mail this form with your check made payable in US funds to:
American Scientific Affiliation, PO Box 668, Ipswich, MA 01938
or to pay by credit card, fill in the information below.

MasterCard or Visa ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐

Signature:_____ Expiration date: _____

Name as it appears on your credit card:_____
please print