

THE OHIO ACADEMY OF SCIENCE

Registration Form

120th Annual Meeting

April 15-16, 2011

Otterbein University

Advance registration must be received by April 8, 2011

ALL MEETING ATTENDEES MUST REGISTER: Access to sessions by name tag only. Name tag, information packet and receipt will be available at the meeting. Please return the completed registration form along with the appropriate fees to the address below.

STUDENTS, SPOUSES, OR RELATIVES: A special discount schedule has been approved to promote and encourage participation of undergraduates, pre-college students, non-science spouses or relatives. All students, non-science spouses, parents or relatives must register using a separate form. This registration does not include membership or meals.

Each person must use a SEPARATE REGISTRATION FORM

Please copy this form as needed.

An Adobe PDF online fill-in form is available at
<http://www.ohiosci.org/OtterbeinRegistrationForm.pdf>

PLEASE PRINT OR TYPE

Check: _____ Ms. _____ Mrs. _____ Mr. _____ Dr.

Name _____
First Middle Last

Job Title _____

School, Organization, Agency, Institution, or Employer

Is the following a home address? _____ Yes _____ No

Students MUST use home, dorm or apartment address.

Address _____

City _____

State _____ Zip _____ Ohio County _____

Work Phone (_____) _____

Home Phone (_____) _____

FAX (_____) _____

EMAIL (_____) _____

MAIL FORM WITH PAYMENT TO:

The Ohio Academy of Science
PO Box 12519
Columbus OH 43212-0519
FAX 614/488-7629

Registration Fees

Please check appropriate categories. One fee covers the entire meeting. Payment must be received by April 8, 2011 to avoid higher rates. On-site registration will be accepted at the higher rate by credit card or check ONLY. ONLY first authors have pre-paid registration when they submitted their abstracts and DO NOT NEED to return this form. First authors are already registered for the meeting.

CURRENT MEMBER REGISTRATION RATE		After Apr. 8
_____ Professional	\$65	\$70
_____ Retired	\$40	\$45
_____ Student	\$25	\$30

NON-MEMBER PROFESSIONAL AND RETIRED REGISTRATION

Includes membership		
_____ Professional	\$ 140	\$145
_____ Retired with Journal	\$ 80	\$85
_____ Retired without Journal	\$ 65	\$70

NON-MEMBER PRE-COLLEGE AND COLLEGE STUDENT

Includes Academy membership		
_____ College Student with Journal	\$ 65	\$70
_____ Student (17 & under) w/Jour.	\$ 65	\$70
_____ Student (17 & under) w/o Jour.	\$ 50	\$55

Does not include Academy membership

_____ Pre-college student	\$20	\$30
_____ College student	\$20	\$30
_____ 5-10 students each	\$15	\$20
_____ 11 or more students each	\$10	\$20

NON-SCIENCE SPOUSE, PARENT OR A RELATIVE OF A FIRST AUTHOR

_____ Spouse, parent or relative	\$10	\$20
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SATURDAY, APRIL 16, SACK LUNCH

_____ Sack Lunch during panel discussion	\$5	\$N.A.
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Please use a separate form for each MEMBERSHIP RENEWAL

_____ Family	\$85
_____ Regular Member	\$75
_____ Retired Member w/OJS	\$40
_____ College Student	\$40
_____ Student (Age 17 & under) w/OJS	\$40
_____ Retired Member w/o OJS	\$25
_____ Student (Age 17 & under) w/o OJS	\$25
TOTAL ENCLOSED	\$ _____

METHOD OF PAYMENT

NO REFUNDS AFTER April 8, 2011. Returned checks subject to a \$30.00 fee. Only registrations paid by Purchase Order, VISA, or MasterCard will be accepted by FAX at 614/488-7629.

_____ This copy confirms a FAXed registration

_____ Check enclosed payable to The Ohio Academy of Science

_____ Purchase order enclosed No. _____

Online payment http://www.ohiosci.org/index_store.html.

Please charge my Credit card _____ VISA _____ MASTERCARD

Name on card _____

Billing address for card _____

Billing phone (_____) _____

CardNumber _____

Exp. Date _____

3-digit Security Code (last 3 digits on back of card) _____

Signature _____