

Contact Information Name: ______ Email _____ Home Address: Primary Phone: _____ Addt'l Phone: _____ **Additional Details** Birthdate: _____ Gender Male ___ Female ___ or ____ Medical/Dietary Concerns: **Transportation** All vehicles on campus require a parking permit. Please advise if you are driving your own vehicle to the workshop, if so all day and overnight attendees will need a parking permit. Yes, I will have a vehicle that needs a parking permit. ____ No, I will dropped off and will not have a vehicle when attending the workshop. **Payment Information** Registration Fees: Residential: \$550.00 Commuter \$450.00 Personal Check (payable to SIU Carbondale) Check # _____ Credit Card # Exp. Date: _____ CVC: Name on Card Billing Address: _____

Please return completed form and payment to:

Anatomical Drawing Workshop SIU Events and Outreach Anthony Hall - Mail Code 6705 1265 Lincoln Drive Carbondale, Illinois 62901 Phone: 618/536-7751 Fax: 618/453-5680

A medical release form is required for workshop participation and must be received in our office at least 5 business days prior to workshop beginning. Visit conferenceservices.siu.edu to download the form.

Payer Email (required): _____