

2016 Eclipse Workshop
June 10-11, 2016
PARTICIPANT REGISTRATION

16B0901201

DEADLINE FOR SUBMISSION: May 27, 2016
OR 60 participants are registered.

Please print or type on this form. This form may be duplicated.

First Name: _____

Last Name: _____

Firm: _____

Home Address: _____

City, State, Zip: _____

Day Phone: _____

Cell Phone: _____

E-mail: _____

Dietary Needs: _____ Any Special Needs: _____

I plan to attend the pre-conference dinner on June 9, 2016 at Giant City Lodge: Yes No (Participants will be required to pay for their own meal)

I plan to attend lunch on Friday: Yes No

I plan to attend dinner reception at Blue Sky Winery on Friday evening: Yes No

I plan to attend lunch on Saturday: Yes No **I need a parking pass (no addt'l charge):** Yes No

Payment Information

Participant Fees: **On or before May 27, 2016:** \$180

Student Fees: \$80 (Includes all meals/receptions)

Credit Card # _____ **Exp. Date:** _____

Name on Card: _____

Billing Address: _____

Payer Email (required): _____

Bill the Firm: Firm Address: _____

ATTN: _____

Please return form & payment to: 2016 Eclipse Workshop • Conference Services • Mail Code 6705
Southern Illinois University Carbondale • Carbondale, IL 62901 • Phone: 618/536-7751 • Fax: 618/453-5680
Contact: Leslie Brock, Conference Coordinator: Email: conferenceservices@siu.edu