

Registration Form
Poultry Science Association Annual Meeting
August 1-5, 1998
The Pennsylvania State University
University Park, PA

(Please print or type)

Name _____ M F

Affiliation _____

Address _____

City _____ State _____ Zip _____

Phone Numbers: Work: _____

Home: _____

Fax: _____

Meeting Address: Hotel/Motel/Dorm (name) _____

	Price per Person BEFORE 06/26/98	Price per Person AFTER 06/26/98	Total (U.S. Dollars)
Registration Feeds:			
PSA Member	\$150.00	\$175.00	_____
PSA Student Member	70.00	95.00	_____
Student, Nonmember	95.00	120.00	_____
Nonmember	225.00	250.00	_____
Spouse/Guest	10.00	15.00	_____
Children	10.00	15.00	_____

**PSA Ancillary Scientists Symposium:
Saturday, August 1, and Sunday, August 2
"Muscle Growth and Development"**

Symposium Fees (including lunch):

Member/Nonmember	65.00	75.00	_____
Student Member/Nonmember	35.00	45.00	_____

SPECIAL EVENTS AND LUNCHEONS

	<u>Number Attending</u>	<u>Price per Person</u>	
SUNDAY, AUGUST 2			
(1) Extension Luncheon	_____	10.00	_____
(2) Elanco Ice Cream Social	_____	0.00	_____
MONDAY, AUGUST 3			
(3) PSA Scientist Lunch Buffet	_____	10.00	_____
(4) PSA Editorial Board Lunch	_____	10.00	_____
(5) Barbecue (at Pennsylvania Military Museum)	_____	16.00	_____
(8) Michigan State Lunch	_____	10.00	_____

	<u>Number</u> <u>Attending</u>	<u>Price per</u> <u>Person</u>	<u>Total</u> <u>(U.S. Dollars)</u>
TUESDAY, AUGUST 4			
(6) PSA Scientist Lunch Buffet	_____	\$10.00	_____
(7) Fun Run	_____	15.00	_____
(9) American Poultry Historical Society Box Lunch and Tour	_____	10.00	_____
(10) Golf Tournament	_____	50.00	_____
(11) Golf Club Rental	_____	10.00	_____
(12) University of Wisconsin Barbecue Supper	_____	5.00	_____
WEDNESDAY, AUGUST 5			
(13) PSA Scientist Lunch Buffet	_____	10.00	_____
(14) National Poultry Waste Management Lunch	_____	10.00	_____
(15) Awards Banquet	_____	35.00	_____
(16) Graduate Student Price (one per registrant)	_____	20.00	_____
PSA ANNUAL MEETING T-SHIRTS			
Adult Sizes:			
(17) Small	_____	10.00	_____
(18) Medium	_____	10.00	_____
(19) Large	_____	10.00	_____
(20) X-Large	_____	10.00	_____
(21) XX-Large	_____	10.00	_____

SUB-TOTAL CONFERENCE REGISTRATION US\$ _____

SUB-TOTAL SPOUSE/GUEST PROGRAM REGISTRATION US\$ _____

SUB-TOTAL YOUTH/TEEN PROGRAM REGISTRATION US\$ _____

Payments Accepted: MasterCard Visa American Express Check

Card# _____ Exp Date _____

Signature _____

GRAND TOTAL ALL FORMS US\$ _____

There will be NO REFUNDS on Special Events after June 26, 1998
The following refund policy is applicable ONLY on MEETING REGISTRATION FEES.

- 1) Full refund if request is received before June 26th, 1998.**
- 2) 75% refund if request is postmarked by July 19, 1998**
- 3) 50% refund if request is postmarked by August 21, 1998**
- 4) After August 21, 1998, there will be NO REFUNDS.**

Return all forms by June 26, 1998 to:

**PSA'98
1111 North Dunlap Avenue
Savoy, IL 61874**

**Tel: 217/356-3182
Fax: 217/398-4119
email: psa@assochq.org**