



ADVANCE REGISTRATION FORM

American Crystallographic Association 2003 Annual Meeting

Family Name _____

First Name _____

Dept. _____

Inst. _____

Box/Apt.# _____

St. _____

City _____

St/Prov. _____

Zip/Postal Code _____

Country _____

Telephone _____

Fax _____

E-mail _____

Registration forms must be postmarked or received on or before June 1, 2003, to qualify for advance registration fee. After June 1, registration will be accepted at the higher rate. On-site registration will also be available at the higher rate. Cancellations and/or requests for refunds should be made in writing and submitted to ACA Headquarters. For cancellations received before June 1, 2003, 100% of the total remittance will be refunded. Requests received between June 2 and June 30, 2003, will be honored minus 50% of the total remittance. Fees will not be refunded for requests received on or after July 1, 2003.

***Increment charged to non-member registration may be credited toward new member dues for 2003 by submitting a membership application form with the registration form.**

All prices are listed in U.S. dollars and must be submitted in U.S. dollars. Purchase orders will not be accepted. Only U.S. checks, VISA, MasterCard and American Express payments will be accepted. ACA, E.I.N. 22-6075182. **Please make checks payable to ACA and mail to:**

ACA Meeting Registration
P.O. Box 96 Ellicott Station
Buffalo, NY 14205-0096 USA

Forms submitted via fax
must include credit card payment information.

Fax: (716) 852-4846
E-mail: aca@hwi.buffalo.edu
Telephone: (716) 856-9600 ext. 379

Registration Fees

	Before June 1	After June 1
<input type="checkbox"/> Regular Member	\$290	\$370
<input type="checkbox"/> Retired Member	\$120	\$160
<input type="checkbox"/> Postdoc Member	\$150	\$210
<input type="checkbox"/> Student Member	\$120	\$160
<input type="checkbox"/> AACG Member	\$290	\$370
<input type="checkbox"/> Nonmember*	\$390	\$470
<input type="checkbox"/> Postdoc NonMember*	\$200	\$260
<input type="checkbox"/> Student Nonmember*	\$160	\$200
<input type="checkbox"/> One-day Member	\$145	\$185
_Sun _Mon _Tues _Wed _Thurs		
<input type="checkbox"/> One-day Nonmember*	\$290	\$370
_Sun _Mon _Tues _Wed _Thurs		

Are you an invited speaker? If yes, list session number _____

REGISTRATION TOTAL \$ _____

Workshops

<input type="checkbox"/> WK01: Twinning & Crystals <input type="checkbox"/> WK02: Data Processing and Scaling with Mosfilm and CCP4	\$80 students & postdocs \$100 all others No fee for WK04 <input type="checkbox"/> WK03: Crystal Growth and Macromolecules <input type="checkbox"/> WK04: Cambridge Structural Database System - No fee
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WORKSHOP TOTAL \$ _____

Social Program

Opening Reception - July 26
No Fee for Registered Participants Will Attend Won't Attend
 Guest ticket \$30 ticket # of guest tickets _____

YSSIG Mentor/Mentee Dinner - July 27
 Mentee \$10 ticket # of tickets _____
 Mentor \$10 ticket # of tickets _____

YSSIG Mixer - July 28
No Fee for Registered Participants Will Attend Won't Attend
 Guest ticket \$10 # of guest tickets _____

Awards Banquet - July 30	Entree choice:
<input type="checkbox"/> \$45 ticket # of tickets _____	___ Beef
<input type="checkbox"/> \$20 student ticket # of tickets _____	___ Chicken
	___ Eggplant

Riverboat Dinner Cruise - July 31
 \$40 ticket # of tickets _____

SOCIAL TOTAL \$ _____

Payment Method

Check (U.S. only) VISA MasterCard American Express

Credit Card Number
 _ / _ / _ / _ - _ / _ / _ / _ - _ / _ / _ / _ - _ / _ / _ / _

Good thru/ Print name of
 exp date ___/___ of card holder _____

Authorized Signature
 of Card Holder _____

TOTAL REMITTANCE \$ _____