

REGISTRATION FORM



**Environmental
Mutagen
Society**

40TH ANNUAL MEETING October 24–28, 2009

Attendees are encouraged to register on-line for the EMS 40th Annual Meeting.
On-line registration is available through the EMS Web site, www.ems-us.org.

(Required: Please check the appropriate box)

PLEASE PRINT OR TYPE

EMS Member Non-Member

First Name/Middle Initial: _____

Last Name: _____ Professional Degree(s): _____

Badge Name Preference: _____

Company Name: _____

Department: _____

Street Address: _____

City: _____ Prov/State: _____ Zip: _____ Country: _____

Area Code/Phone Number: _____ Fax Number: _____

E-mail Address: _____

If you are a student or postdoctoral registrant, please provide the following information:

Postdoc Graduate Student Undergraduate Student

Institution: _____ Advisor's Name: _____

Advisor's Phone Number: _____ Advisor's E-mail: _____

REGISTRATION FEES

	Early Bird Registration (Received by July 1)	Advance Registration (July 2–Sept. 15)	Pre- and On-Site Registration (After Sept. 15)	
EMS Members	\$425.....	\$500.....	\$575	\$ _____
Emeritus Members	\$300.....	\$325.....	\$375	\$ _____
Non-Members	\$585.....	\$660.....	\$735	\$ _____
New Investigator	\$200.....	\$225.....	\$275	\$ _____
Student	\$100.....	\$125.....	\$175	\$ _____

SIG Breakfasts

Each breakfast
is \$15.

Yes, I would like to attend one of the following SIG Breakfasts:

Epigenetics Group (Sun.)

Heritable Mutation and Disease Group (Sun.)

Transgenic and *In Vivo* Mutagenesis Group (Sun.)

DNA Repair Group (Mon.)

New Technologies Groups (Mon.)

Molecular Epidemiology Group (Tues.)

Risk Assessment Group (Tues.)

\$ _____

SIG Lunch

Lunch is \$25.

Yes, I would like to attend the Women in the EMS SIG Lunch on Tuesday, October 27, 2009.

\$ **25.00**

Student Event

Yes, I would like to attend the complimentary Student and New Investigator Brunch on Monday, October 26, 2009. (Open to student and postdoc registrants.)

continues on next page

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Environmental Mutagen Society 40th Annual Meeting • October 24–28, 2009 • St. Louis, Missouri

Name: _____

WORKSHOPS

Yes, I would like to attend a Workshop(s) on Saturday, October 24, 2009.

		Early Bird Registration (Received by July 1)	Advance Registration (July 2–Sept. 15)	Pre- and On-Site Registration (After Sept. 15)
<input type="checkbox"/> Bacterial Mutagenicity Screening for Discovery Support and Drug Candidate Selection (8:30 AM–12:30 PM)	(Member/Emeritus Member)	\$75.....	\$95.....	\$125 \$ _____
	(Non-Member)	\$100.....	\$120.....	\$150 \$ _____
	(New Investigator)	\$50.....	\$60.....	\$85 \$ _____
	(Student)	\$25.....	\$35.....	\$60 \$ _____

		Early Bird Registration (Received by July 1)	Advance Registration (July 2–Sept. 15)	Pre- and On-Site Registration (After Sept. 15)
<input type="checkbox"/> Gene Mutation Assays Based on the Endogenous <i>PIG-A</i> Locus (1:00 PM–4:30 PM)	(Member/Emeritus Member)	\$75.....	\$95.....	\$125 \$ _____
	(Non-Member)	\$100.....	\$120.....	\$150 \$ _____
	(New Investigator)	\$50.....	\$60.....	\$85 \$ _____
	(Student)	\$25.....	\$35.....	\$60 \$ _____

SPECIAL SERVICES

If you require special services, please describe on the line(s) below. For more information about special services, please call EMS Headquarters at (703) 438-8220 or e-mail at emshq@ems-us.org.

METHOD OF PAYMENT

All registrations submitted by hard copy or fax will be processed on-line by EMS staff.

TOTAL DUE \$ _____

Check or Money Order #: _____

U.S. Government Purchase Order #: _____ (U.S. Government P.O. Form must be attached)

American Express Discover MasterCard VISA

Credit Card #: _____ Expiration Date: _____

Signature: _____

Cardholder's Printed Name: _____

There is a \$20 charge for cancellation of the Meeting Registration before September 15, 2009. No refunds after September 15, 2009.

EMS Annual Meeting registrants grant EMS permission to reproduce, copy, and publish photographs taken at the Annual Meeting unless written notification by the registrant, stating otherwise, is submitted to the EMS Headquarters office prior to the Annual Meeting or while registering on-site.

All payments must be in U.S. currency. No phone registrations will be accepted. Faxes for credit cards only: (703) 438-3113

**Payment by check, please send Registration Forms to:
EMS Headquarters • 1821 Michael Faraday Drive, Suite 300 • Reston, VA 20190**