Shark Reef Aquatic Medicine Seminar
February 17, 18, and 19 2012 Las Vegas, Nevada

THIS FORM IS FOR ALL REGISTRATIONS WHETHER PAID BY CHECK OR CREDIT CARD. All registrations must be submitted by hard copy. You can print out the registration form and send it by postal mail or fax to the Conference Manager's office; address and contact information listed at bottom of page.

FEES:	**Lectures**	$ 350.00
	Wet Lab ***(limit 30 attendees)***	$ 75.00

Conference Registration Form

Please complete all required fields to avoid delay in processing.

Name Badge Information: Personal Titles will not be used at this conference, ie: Dr., Mr., Ms.
*Denotes required field.

*First Name: Do not use all capital letters.

*Surname (Family Name/Last Name):

*E-mail address (Primary e-mail):

*Telephone number (Please include area code):

*Scrub Top Size (Male/Female)

*Cell phone (Please include area code):

* Fax number (Please include area code):

*City:

*Company or Institution:

State / Province:
(Outside US & Canada choose "-none-")
Select a State

*Country:
Select

Mailing Information:

To make arrangements for payment by credit card – contact Joan Bravo (702) 632-4559

Please send payment with registration form and make check payable to Mandalay Bay Resort and Casino to:

Shark Reef at Mandalay Bay
ATTN: Jack Jewell
3950 Las Vegas Blvd. South
Las Vegas, NV 89119

Form can also be faxed to (702) 632-4553

TO AVOID INCREASE PAYMENT AND REGISTRATION FORM MUST BE RECEIVED BY FEBRUARY 6, 2012
AFTER FEBRUARY 6, 2012 REGISTRATION WILL INCREASE TO $450.00

Should you need additional information please call (702) 632-4560 or go to www.sharkreef.com

Hotel and accommodation information available at www.mandalaybay.com