

## Mike Wells Fest Registration Form

Name:		
Title:		
Institution:		
Street Address:		
City, State & Zipcode:		
Country if not US:		
Phone (including area code):		
E-mail:		
I would like to present a poster (please check yes or no).	Yes	No

Number of people in your party (including yourself): \_\_\_\_\_

How many in your party plan to attend the Sat. Day of Science (free; includes lunch)? \_\_\_\_\_

Please circle your lunch preferences:

Sandwich filling choices: turkey    ham    roast beef    chicken salad    tuna    veggie

How many in your party plan to attend the Sat. reception (free)? \_\_\_\_\_

How many people in your party plan to attend the Sunday Brunch  
((\$35 each; includes admission to Butterfly Exhibit) \_\_\_\_\_ x \$35 = \_\_\_\_\_

Number of people in your party plan to attend the Butterfly  
Exhibit **only (no Brunch)** (\$3 each) \_\_\_\_\_ x \$3 = \_\_\_\_\_

Commemorative t-shirt (\$12 each); please circle size:    S    M    L    XL    2XL    \_\_\_\_\_ x \$12 = \_\_\_\_\_

TOTAL COST \_\_\_\_\_

Please indicate your method of payment (in US dollars):

Visa \_\_\_\_\_    MasterCard \_\_\_\_\_    American Express \_\_\_\_\_    Check/Money Order \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date:    Month \_\_\_\_\_    Year \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address:    Street: \_\_\_\_\_

City: \_\_\_\_\_    State \_\_\_\_\_    Zipcode: \_\_\_\_\_

Country if not US: \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

Please make checks payable to The University of Arizona. **If you pay via credit card, your statement will show a charge from UofA Support Services.**

Please print this form, fill it out, and mail it with your payment to: Ellie Warder, University of Arizona, Dept of Biochemistry, 1041 E Lowell St, Tucson AZ 85721-0088.