

DAVIS SYMPOSIUM - REGISTRATION FORM

28-29 April, 2006

University of Texas at Austin

Complete this form and return it no later than **April 1st, 2006**

Dr. Bobby L. Barnett
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Registration Information:

First and Last Name (for badge)	_____
Affiliation (for badge)	_____
Mailing Address :	_____ _____ _____ _____
Phone: _____	Fax: _____
E-mail: _____	
Accompanying person(s):	_____ _____
Conference Registration Fee: \$15.00 (includes opening reception and refreshment breaks) Note: <i>UT students and postdocs can attend the Saturday Conference for no fee, but must register.</i>	Number Attending _____

Banquet: \$60.00

Number Attending _____

PAYMENT: Check or money order made payable to: **Bobby Barnett - Davis Symposium and mail to the address above.**

Please list any special needs: _____

Further information on the program and local arrangements can be found on our web site at:
http://bioinst.cm.utexas.edu/davis_sympos