

REGISTRATION FORM
Cell 2 Soul Conference ● September 29 – 20. 2007

Physicians: \$175. After August 15, \$200

Nurses and Residents: \$125. After August 15, \$150

The Public: Registration based on income level – Suggested \$125

A limited number of scholarships are available.

[The fees were set based on our expenses and no administrative fees – the budget is available to anyone who wishes to see it]

Cancellation Policy: A \$50 non-refundable fee is charged for cancellations before September 10. Thereafter no refunds can be given. All cancellations must be in writing.

Please print form, fill out and make check payable to:

"Kauai Foundation – Cell 2 Soul Conference"

c/o The Skin Clinic

12 Meadow Street

Williamstown, MA 01267

Date: _____

Tuition fee enclosed: \$ _____

Total: \$ _____

Physicians: \$175. After August 15, \$200

Nurses and Residents: \$125. After August 15, \$150

The Public: Suggested \$125

Full Name: Last _____ First _____ Middle Initial _____

Title _____ Affiliation _____

Daytime Phone _____ Fax Number _____

Email Address _____

Street Address _____

City _____ State _____ Zip Code _____

Specialty or Profession _____

For those of you who are not familiar with this area, visitor information including lodging, can be obtained at: <http://www.williams.edu/home/visitors.php>