

CONFERENCE REGISTRATION FORM
February 5-7, 2012
Fairmont Royal York, Toronto, Ontario

Section A: Delegate Information (please provide ALL of the following information)		
Dr./Mr./ Ms.	First Name	Last Name
Title (if applicable)		Institution/Organization (if applicable)
Home Address		
City	Province/State	Postal Code/Zip Code
Email		
<input type="checkbox"/> Male <input type="checkbox"/> Female	Phone ()	Fax ()
Any dietary restrictions/allergies?	Please Specify:	
Section B: Conference Registration (February 5 – 7, 2012)		
Conference Registration Includes: breakfast, luncheon and refreshment breaks, gala dinner, trainee networking night, access to all sessions and guest speakers		
Attendee Type (Please check one box)	Early Bird By January 6, 2012	Full Price After January 6, 2012
<input type="checkbox"/> Private sector	\$500	\$550
<input type="checkbox"/> University/Hospital/Government	\$350	\$400
<input type="checkbox"/> Not-for-profit/NGO	\$250	\$300
<input type="checkbox"/> Trainee/Patient/Parent/Member of the public	\$200	\$250
<input type="checkbox"/> Single Day Rate	\$100	\$150
<input type="checkbox"/> Please check if you are attending the Trainee Social Event on February 5, 2012 (<i>all delegates are invited</i>) <input type="checkbox"/> Please check if you are bringing a guest to the Trainee Social Event - <i>add an additional \$30 to your payment</i>		
<input type="checkbox"/> Please check if you are attending the Gala Dinner on February 6, 2012 (<i>all delegates are invited</i>) <input type="checkbox"/> Please check if you are bringing a guest to the Gala Dinner - <i>add an additional \$75 to your payment</i>		
Section C: Payment Method		
<input type="checkbox"/> Cheque enclosed (Make cheques payable to McMaster University)		
<input type="checkbox"/> Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	Card # _____ Expiry Date (month/year): ____ / ____	
Cardholder Name (please print): _____		
Cardholder Signature: _____		
Cancellation Policy Cancellations must be received in writing by the AllerGen office no later than January 6, 2012. An administration charge of \$50 will apply to all refunds. NO refunds will be provided after January 6, 2012.		

The Fairmont Royal York Hotel has allocated a block of rooms under AllerGen's name at a rate of \$185 per night. Attendees must book their own rooms. Trainees' rooms must be double occupancy in order to qualify for AllerGen's travel reimbursement. Please visit www.allergen-nce.ca for more information.

Please complete and return to: AllerGen NCE Inc.
 1280 Main St. W., MDCL Room 3120
 Hamilton, ON L8S 2A5
 FAX: 905-524-0611 Attn: Liz Dzaman, info@allergen-nce.ca
 Ph: 905-525-9140 ext 26502