



Sunday, March 22 & Monday, March 23, 2009

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_ Vegetarian or other needs: \_\_\_\_\_

√	Registration includes: Sunday evening reception; Breakfast, refreshments, Lunch, and access to sessions and displays on Monday.  Also included with your fee (except for students) is the Monday Reception and Banquet dinner (please select your entrée below).	Fee
	<b>Sponsor:</b> circle level: <b>\$5000 / 2500 / 750 / 250</b> fill in amount	\$
	<b>Tabletop</b> (6 foot by 3 foot skirted tabletop with one registration included)	\$195 (banquet included)
	<b>Late Tabletop</b> (6 foot by 3 foot skirted tabletop with one registration included) (after Feb. 25, 2009)	\$245 (banquet included)
	Professional or Faculty banquet included ____ I will attend the Sunday Reception (5 – 6:30 p.m.)	\$145 (banquet included)
	Professional or Faculty banquet included (after Feb. 25, 2009) ____ I will attend the Sunday Reception (5 – 6:30 p.m.)	\$175 (banquet included)
	Student with NO Banquet	\$60
	Monday evening banquet dinner	<b>\$30</b>
	<b>Total due</b>	<b>\$</b>

**Menu selection: Please  check your entrée choice below:**  
 Monday banquet dinner (check one)  
 \_\_\_\_ Almond & Apple-Stuffed Turkey or \_\_\_\_ Cheese-Filled Tortellini

**Method of Payment:  Check one method**  
 \_\_\_\_ Register online (VISA or MC): [www.esf.edu/outreach/pd/2008/bioprocessing/](http://www.esf.edu/outreach/pd/2008/bioprocessing/)  
 \_\_\_\_ Check payable to: **SUNY Research Foundation** (payment must be received prior to event)  
 \_\_\_\_ Voucher or Purchase Order Number: \_\_\_\_\_ (provide the PO/Voucher number)  
 (Payment is due within 30 days after the event.)  
 \_\_\_\_ I am a SUNY-ESF employee/student and paying with **Research Foundation** Funds. Below is the RF account to be billed:  
 Award \_\_\_\_\_ Task \_\_\_\_\_ Project \_\_\_\_\_ If paying with a **State**  
**account**, please submit a Purchase Request form to the Purchasing Dept.

**Mail or Fax completed registration form with FULL PAYMENT to:**  
 ESF Outreach, SUNY-ESF, 1 Forestry Drive, 221 Marshall Hall, Syracuse, NY 13210, **Phone: 315-470-6817, Fax: 315-470-6890**

**Cancellations/Refunds:** Refunds minus a \$50 administrative fee will be issued for written cancellations received two weeks prior to the conference. Cancellations will **not** be accepted by phone. Substitutions are permissible at any time.