



REGISTRATION FORM

Name _____

Affiliation _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Meeting Registration Fee	Before November 15, 2018	Before July 1, 2019	July 1, 2019 and After
Regular	_____ \$500	_____ \$575	_____ \$625
Young Investigator*	_____ \$225	_____ \$300	_____ \$350

Accompanying Person (Meals Only) _____ \$350 _____ \$400

TOTAL \$ _____

Make check payable to the American Society of Animal Science and submit with registration information by July 26, 2019 to: ASAS, Perinatal Biology Symposium Registration, PO Box 7410, Champaign, IL 61826 or fax to 217-568-6070. Cancellation Policy: To be eligible for a 90% refund of meeting registration fees, requests must be received in writing before July 3, 2019.

*Young Investigators are defined as individuals still in full time training (PhD or MD; Medical Fellows or Residents; Post-doctoral Fellows) or researchers in a faculty or equivalent position within 6 years of their terminal degree (PhD or MD). To receive the reduced Young Investigator registration fee, registrants must provide a letter from their department head, chair or mentor verifying their status. The letter can be faxed to 217-568-6070 or email as a PDF attachment to asas@asas.org.

Visa
 MasterCard
 American Express
 Discover
 Total amount to charge: _____

Credit Card Number _____
 Expiration Date _____

Signature _____