



KR-MED 2006

International Workshop - November 8, 2006 in Baltimore, MD, USA

Biomedical Ontology in Action



Advance Registration Form

Fax this form with your credit card details to Sandra Smith (+1 716 634 3215). No cover sheet is needed.
Or, if you prefer, mail this form with payment information (or check/money order) to:
Sandra Smith • 1260 North Forest Road • Cambridge House Suite 7 • Williamsville, New York 14221 USA.

Please print legibly. This information will be used for name badge purposes.

Name _____

Affiliation _____

Address _____

Country _____ Phone _____

Email _____

Registration Fee

\$100.00 Advance Registration Fee (Must be received on or before October 16, 2006)

\$125.00 On-site Registration Fee

Payment Details

Check/Money Order (Payable to BCOR Resource Fund) Enclosed Amount _____

Credit Card Payment Type: MasterCard/Visa Discover American Express

Credit Card Number _____ Expiration Date _____

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Billing Address _____

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Please note: Charge will appear on cardholder's statement as "UB Foundation".