

# 23rd ANNUAL MEETING REGISTRATION

2010 AMLI Annual Meeting  
**The Hyatt Regency Grand Cypress**  
 Orlando, Florida  
 August 7-10, 2010

## REGISTRATION FORM

PLEASE PRINT OR WRITE LEGIBLY

<b>Name</b>	
<b>Degree</b>	
<b>Institution of Affiliation</b>	
<b>Address</b>	
<b>City, State, ZIP</b>	
<b>Telephone and Fax</b>	/
<b>E-mail</b>	
<b>Current Member</b>	<input type="checkbox"/> <b>\$300</b> Before July 10, 2010 <input type="checkbox"/> <b>\$325</b> After July 10, 2010 <input type="checkbox"/> <b>\$125</b> Daily Fee
<b>Non-Member</b>	<input type="checkbox"/> <b>\$375</b> Before July 10, 2010 <input type="checkbox"/> <b>\$400</b> After July 10, 2010 <input type="checkbox"/> <b>\$150</b> Daily Fee
<b>Students &amp; Postdoctorals</b> (letter from mentor required)	<input type="checkbox"/> <b>\$125</b> Before July 10, 2010 <input type="checkbox"/> <b>\$150</b> After July 10, 2010 <input type="checkbox"/> <b>\$100</b> Daily Fee
<b>Annual Dinner (Please include payment with registration)</b>	<input type="checkbox"/> <b>\$50</b> per Registered Member <input type="checkbox"/> <b>\$75</b> per Non-Member & Guest
<b>New England Aquarium</b>	
<b>Payment Info</b>	<input type="checkbox"/> Check enclosed (payable to AMLI) <input type="checkbox"/> Credit Card (circle one) VISA      MasterCard <b>Card#</b> _____ <b>Exp Date</b> _____ <b>Name on card:</b> _____  <b>Signature</b> _____ <b>Date</b> _____  <b>Amount of Charge \$</b> _____

Print and Mail, Email or Fax Completed Form and Payment to:  
 Maggie Fogel, AMLI Administrator  
 34 West 83rd Street, Suite R, New York, New York 10024  
 TEL 212-873-2955 ~ FAX 212-873-2344 ~ [maggie@maggiefogel.com](mailto:maggie@maggiefogel.com)

**Cancellation Policy:** If it is necessary to cancel your registration, all fees will be returned less a \$35 administrative fee.