



ARPEP 2005 NEW FRONTIERS WORKSHOP
April 29-30, 2005
Registration Form

PERSONAL DATA

Please check preferred salutation: Dr. Prof. Mr. Ms. Mrs.

Last Name: _____ First Name: _____
Organization: _____ Department: _____
Address: _____
City: _____ Province/State: _____
Postal/Zip Code: _____ Country: _____
Telephone: _____ Fax: _____

Email Address: _____

Special Dietary
Restrictions: _____

Include my name on the list of participants: Yes No

CONFERENCE FEES

Fees include all sessions, refreshment breaks, lunches and dinner on April 29th.

Registration Fee:

If registration received before April 8, 2005	No Fee
If registration is received after April 8, 2005	\$ 100.00 CDN
TOTAL DUE (non-refundable)	\$ _____ CDN

Registration fees are payable by cash or cheque.

Please mail, fax or email your completed registration form to:

ARPEP 2005 New Frontiers Workshop
c/o: Advanced Materials and Process Engineering Laboratory (AMPEL)
University of British Columbia
111 – 2355 East Mall
Vancouver, BC
V6T 1Z4

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Fax: 604-822-4750
Email: ARPEP2005NF@physics.ubc.ca