Biological Systems Simulation Conference
March 8-10, 2004 • Hilton UF Hotel • Gainesville, Florida

Name:(first) _____________________________________________ (last) ________________________________________________
Title: (Dr., Mr., Ms., etc.) ________________________________
Affiliation: ___________________________________________________________________________________________________________________________
Business Address: _________________________________________________________City: __________________________ State: _______ Zip: ______________________
Phone: ____________________________________ FAX: ________________________________________Email:  ______________________________________________

Registration Fee (includes: a copy of the abstract book, morning & afternoon refreshment breaks, lunches, and tour. )

$225 Early Reduced Registration Fee (for fees postmarked on or before January 9, 2004)

$275 Regular Registration Fee (for fees postmarked after January 9, 2004)

$150 Student Registration Fee

$ ________ Total amount enclosed (payable to UFLEF) — Journal Transfer Payments NOT Accepted. —

Early registration deadline is January 9, 2004.
To qualify for the early registration fee, payment must accompany this registration form.

Please indicate type of presentation:

☐ Oral       ☐ Poster

☐ Software demonstration   ☐ None

CONVENIENTLY REGISTER IN ONE OF THREE EASY WAYS:

1.) ONLINE: If paying by credit card, conveniently register online via the event registration website located at:
conference.ifas.ufl.edu/bssg

2.) BY FAX: If paying by credit card, complete and FAX your registration to: (352) 392-9734.

3.) BY MAIL: Make check, money order or purchase order payable to UF Leadership and Education Foundation (UFLEF), complete the registration form and mail it with payment to:

Biological Systems Simulation
UF/IFAS Office of Conferences & Institutes (OCI)
PO Box 110750
Gainesville, FL 32611-0750
PHONE: (352) 392-5930

• Payment receipts will be mailed within 10 business days of receiving your registration.

Refund Policy: Requests for registration refunds will be honored if written notification of cancellation is received by the Office of Conferences on or before February 2, 2004. A $50.00 processing fee will be deducted from all refunds. Sorry, no refunds will be honored for cancellations after February 2, 2004.

OFFICE USE ONLY  Receipt #: ____________________________  Check #: ______________  Cash: ______________
Date received: ____________________  PO #: _____________________________  Money Order: _____________________________  Amount received: ______________

Journal Transfer Payments NOT Accepted.

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