# **Dipterists Society**

### REGISTRATION 2024 FIELD MEETING



Member ID:	Date:	
Surname:		
Given name(s):		
Institution (if applicable):		
Mailing address:		
City:	State/Province:	
Postal Code:	Country:	
Telephone (including country & city codes):		
Email address:		
Registration option		Amount
Regular Registration (to April 30)		\$510.00
Student Registration (to June 30)		\$350.00
Late Registration (May 1 to June 30)		\$600.00

#### **GRAND TOTAL**

#### Meeting Activities planned:

**Optional Field Meeting sponsorship?** 

Optional Charitable Donation to the Society

Collecting onlyIGiving a presentationIPresenting a posterI

## Dietary restrictions:

(\$1 minimum)

(\$1 minimum)