REGISTRATION FORM

16th Annual Penn State Radiation Safety Roundtable
September 25–27, 2017

Payment in full, by check, credit card, or money order, must accompany this form. This form may be duplicated for additional registrations. Please print in ink or type. Registration confirmation will be sent to the email address that you provide. Include all information requested and return the completed form to Penn State by Tuesday, September 19.

Last name ___________________________ First name ________________________ Middle initial ________

Date of birth (month/day/year) ____________________________ ○ Male ○ Female

Email address
Penn State will use email address to communicate with you about all programs for which you register. Your email address will also be used to communicate logistical information regarding the program.

Company or organization ________________________________

Occupational title ________________________________

Please check one: ○ Work address ○ Home address

Mailing address (no. and street, or box no.) ________________________________

City __________________________ State __________________________

ZIP code __________________________ Country __________________________

Phone number __________________________ Fax number __________________________

Special Dietary needs/accommodations (if none, leave blank) ________________________________

Applicant’s PSU ID no. __________________________ (if you do not have a PSU ID, you may supply your SSN*)

*Providing your Social Security Number is optional. The Social Security number (SSN) you provide for enrollment purposes, or when requesting specific services, will be used by the University to verify your identity for official record keeping and reporting. If you choose not to supply your SSN, certain services — such as transcripts, enrollment verification, tax reporting, and financial aid — may not be available to you, and Penn State cannot guarantee a complete academic record for you. Your SSN will be stored in a central system and used only as a primary source to identify you within the Penn State system; the Penn State ID will be used as the primary identifier.
**Full Workshop Fee** (includes lunches and beverages/breaks during the workshop)

- $295

**One-Day Workshop Fee** (includes lunch and breaks for selected day of attendance)

- $145

Indicate day of attendance:  
  - Monday
  - Tuesday
  - Wednesday

**Confirmation**

You will receive confirmation by email; if you do not provide an email address, you will receive confirmation by postal mail.

**Refunds**

If your request to withdraw is received at least 15 business days prior to the first day of the program, we can issue a partial refund. Send your written request by fax to 814-863-5190 or by email to conferences@outreach.psu.edu. A $50 administrative fee will be charged for each withdrawal.

**Substitutions**

Anyone who is registered but cannot attend may identify a substitute. A full refund will be issued after the substitution registration has been completed. A registration form and full payment by the substitute are required. Substitutes are eligible to register at the same fee.

**Payment**

Your payment, in full, must accompany your registration form. The Pennsylvania State University's federal ID number is 24-6000376.

- Enclosed is a check or money order for the amount indicated, signed and payable to The Pennsylvania State University.
- Enclosed is a purchase order (made payable to The Pennsylvania State University) or letter of authorization from my employer or sponsoring organization.
- Credit card: May be mailed or faxed.

- American Express
- MasterCard
- Visa
- Discover

Cardholder's name (please print) ________________________________________________________________

Cardholder's signature ________________________________________________________________

Credit card billing address (no. and street, or box no.) __________________________________________

City __________________________________________ State _______

ZIP code ___________________________ Country __________________________________________

Credit card number ___________________________ Exp. date (month/year) _______

(Credit card charges cannot be processed without signature and expiration date.)
Before Mailing:
- Complete all information.
- Registration form and payment due by Tuesday, September 19. After September 19, please call the conference planner at 814-863-5100 or email conferences@outreach.psu.edu to check on availability and/or information about on-site registration.

Did You Remember to:
- Enclose payment in full?
- Meet the Tuesday, September 19, deadline to return the registration form?

Send All Registration Pages to:
Conferences and Institutes Registration
The Pennsylvania State University
Box 410
State College PA 16804-0410
Fax: 814-863-2765