Conference Registration Form

International Summit on Transdisciplinary Approaches to Violence Prevention

November 12-13, 2010
Blacksburg, Virginia, USA

Please print or type—complete a separate form for each participant

Name ____________________________________________________________

Title ____________________________________________________________

Organization ____________________________________________________

*Org.’s FID# _____________________________________________________

Address _________________________________________________________

City ____________________ State _______ Zip _________________________

Daytime Phone No. ___________ Fax No. _____________________________

E-mail __________________________________________________________

Signature _________________________________________________________

Registration fee: ☐ $125 General attendees (564669)

Do you have any medically necessary dietary needs? If so, please indicate: ________________________________

Academic Department: ____________________________________________

Field: __________________________________________________________

Disciplinary expertise/interest: _____________________________________

Method of payment: Payment of registration fees is required prior to program attendance. Registration will be processed when payment is received.

☐ Check enclosed (Make payable to: Treasurer, Virginia Tech CE)

☐ Credit Card: ☐ Visa ☐ MC ☐ AmEx

Card No. ___________________________ Exp. Date ______________________

Cardholder name __________________________________________________

Cardholder signature __________________________ Date _______________

Return with payment by November 8, 2010 (no staples, tape, or paper clips, please) to:

Conference Registrar
Continuing and Professional Education
Virginia Tech, Mail Code 0272
702 University City Blvd.
Blacksburg, VA 24061

phone: 540/231–5182
fax: 540/231–3306 (for credit card registrations only)

Refund and Cancellation Policy
Requests for refunds will be honored when received seven calendar days prior to the program. However, another person may be substituted at any time for this program. A $25 administrative fee will be deducted for cancellations. In the unlikely event that this program is cancelled or postponed due to insufficient enrollments or unforeseen circumstances, the university will fully refund registration fees but cannot be held responsible for any other expenses, including cancellation or change charges assessed by airlines, hotels, travel agencies, or other organizations.

For weather or disaster-related program cancellation or postponement information, please call 540-231-9489.

Office Use

Received

AMT: _____________

CC/CHK#: __________

DATE: ______________

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