

## General Information

DATE: February 7 – 11, 2005

LOCATION: University of Hawaii at Manoa Campus Center

REGISTRATION FEE: \$495

Make check payable to: **UNIVERSITY OF HAWAI'I**. Mail with the registration form to: University of Hawai'i Conference Center; 2530 Dole St., C404; Honolulu, HI 96822.

DEADLINE: Deadline for advance registrations is - January 28, 2005. Form of payment must accompany the registration. Credit card numbers submitted with registration will be processed upon receipt. Registrations will not be processed without payment.

Government and company purchase orders with authorized signature will be accepted and must accompany the registration form. Participants registering by purchase order will be billed for nonattendance unless notification of withdrawal is made by February 4, 2005

REFUNDS: Requests for refunds will be received at the UH Conference Center by February 4, 2005, in writing. No refunds will be made thereafter. Refunds will be mailed. Please allow approximately three to five weeks for processing.

ACCESSIBILITY ASSISTANCE: If you would like assistance due to a mobility, hearing or sight impairment, you are warmly encouraged to contact the Conference Center at 956-8204 by January 7, 2005.

PLEASE DIRECT ALL REGISTRATION INQUIRIES TO:

**UH Conference Center at (808) 956-8204**  
**(808) 956-3364 (fax)**

# REGISTRATION FORM

**Comprehensive Industrial Hygiene Review Course  
February 7-11, 2005**

Feel free to copy this form for additional registrations  
Please **print or type**.

Name: \_\_\_\_\_  
Last First

Affiliation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip code

Phone: \_\_\_\_\_  
business fax

Email address: \_\_\_\_\_

Registration fee: \$495

## Form of payment:

Check made payable to the **University of Hawaii**

I hereby authorize University of Hawai'i the use of my credit card account:  VISA  MasterCard **Expir. date (Mo/Yr) \_\_\_\_\_**

Credit Card No. \_\_\_\_\_

Signature \_\_\_\_\_

Purchase order. P.O # \_\_\_\_\_  
(Must accompany registration form)

Send registration form and payment to:

UH Conference Center  
2530 Dole St., Sakamaki, C404  
Honolulu, HI 96822

808.956.8204 [phone]; 808.956.3364 [fax]

UHCC I.D. #C07346

Accessibility assistance: See general information