

# SAFP 2008 REGIONAL MEETING REGISTRATION FORM

April 30-May 2, 2008  
Early Registration Deadline: 1 April 2008

Please print clearly:

\_\_\_\_\_  
PREFIX/RANK      FIRST NAME      LAST NAME/SUFFIX (Jr., Sr.)      DESIGNATION (Pharmacist, Tech)

\_\_\_\_\_  
NAME (AS YOU WANT IT TO READ ON YOUR BADGE)      FACILITY

\_\_\_\_\_  
MAILING ADDRESS (Please circle one) Business or Home Address

\_\_\_\_\_  
CITY                      STATE                      ZIP                      COUNTRY

\_\_\_\_\_  
E-MAIL (CONFIRMATION WILL BE SENT TO THIS E-MAIL ADDRESS)      DAYTIME PHONE NUMBER

## **REGISTRATION FEE INFORMATION**

Early Resgistration-\$40.00      \_\_\_\_\_      *Before April 1, 2008*

Late or on-site Registration-\$50.00      \_\_\_\_\_      *After April 1, 2008*

One day Registration-\$25.00      \_\_\_\_\_      Please indicate day: \_\_\_\_\_

Optional golf outing - \$50.00      \_\_\_\_\_      (9am tee-off on May 30, will include LOTS of door prizes as well as lunch)

\_\_\_\_\_  
Total      \_\_\_\_\_

## **METHOD OF PAYMENT**

Check or Money Order # \_\_\_\_\_, payable to SAFP, TAX ID 52-1777

### **Fax your registration form to:**

DSN 674-1222 or Commercial 937-904-1222

### **Mail your form to:**

TSgt Heather Agnew  
88 DTS/SGQP  
4881 Sugar Maple Drive  
Wright-Patterson AFB, OH 45431

## **ADDITIONAL EDUCATIONAL OPPORTUNITY**

In addition to the core educational program, networking events and vendor displays included as part of the conference registration fee, SAFP has planned a guest speaker to come talk about asthma. Please indicate if you plan to attend the Wednesday pre-symposium program. Pre-registration is required to attend the Wednesday, 30 April program. There is no additional fee, but attendance is limited to 30 attendees.

\_\_\_\_ I will attend the afternoon program

\_\_\_\_ I will not attend the afternoon program