



MEETING REGISTRATION FORM

SPS 17th Annual Meeting

September 24–27, 2017 | Berlin, Germany

To Register Online:
www.safetypharmacology.org

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|---|--|
| (Please check the appropriate box) <input type="checkbox"/> SPS Member <input type="checkbox"/> Nonmember | For Office Use Only Date Received: _____ Input: Initials: _____ |
|---|--|

Please complete all items on this registration form—type or print legibly.

First Name: _____

Last Name: _____

Affiliation/Agency/Institution: _____

Address: _____

City: _____

Prov/State: _____

Zip: _____ Country: _____

Telephone (with country code): _____

Fax: _____

Email: _____

Do you require any Special Services? _____

Registration—Fees for Meeting

| Please check applicable box. | Until July 15 | Until Aug. 15 | After Aug. 15 |
|---|------------------|------------------|------------------|
| <input type="checkbox"/> SPS Members | \$750 | \$850 | \$950 |
| <input type="checkbox"/> SPS Member (Emeritus) | \$50 | \$50 | \$50 |
| <input type="checkbox"/> Academic | \$500 | \$600 | \$700 |
| <input type="checkbox"/> Nonmember (Industry) | \$950 | \$1,050 | \$1,150 |
| <input type="checkbox"/> Student | \$250 | \$300 | \$350 |
| <input type="checkbox"/> US Federal/Int'l Regulatory Agency Employee | Waived | Waived | Waived |
| <input type="checkbox"/> Exhibitor (2 per 3m x 3m Booth) | Complimentary | | |
| <input type="checkbox"/> Exhibitor Member | \$750 | \$850 | \$950 |
| <input type="checkbox"/> Exhibitor Nonmember | \$950 | \$1,050 | \$1,150 |
| <input type="checkbox"/> One-Day Registration | \$250 | \$300 | \$350 |
| <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday | \$250 | \$300 | \$350 |

Continuing Education Courses (Sunday)—Fees per Course

Select CE Course(s):

Morning (08:00–12:00)—AM 1 AM 2 AM 3
 Afternoon (14:00–18:00)—PM 1 PM 2 PM 3

| | | | |
|--|-------|-------|-------|
| <input type="checkbox"/> SPS Members | \$240 | \$270 | \$300 |
| <input type="checkbox"/> SPS Member (Emeritus) | \$80 | \$110 | \$140 |
| <input type="checkbox"/> Academic | \$240 | \$270 | \$300 |
| <input type="checkbox"/> Nonmember (Industry) | \$260 | \$290 | \$320 |
| <input type="checkbox"/> Student | \$80 | \$110 | \$140 |
| <input type="checkbox"/> US Federal/Int'l Regulatory Agency Employee | \$240 | \$270 | \$300 |
| <input type="checkbox"/> Exhibitor Member | \$240 | \$270 | \$300 |
| <input type="checkbox"/> Exhibitor Nonmember | \$260 | \$290 | \$320 |
| <input type="checkbox"/> CE Course(s) Only (\$325—All times) | \$325 | \$325 | \$325 |

Lunchtime Mini Course (Sunday)

Please check applicable box. Seating limited; registration and ticket required.

Lunchtime Mini Course: SEND for Safety Pharmacologist
 12:30–13:30 \$25 Boxed Lunch Included \$0 No Boxed Lunch

Berlin TV Tower Dinner (Tuesday)

Space is limited; registration and ticket required.
 Tuesday, September 26 at 19:30–23:00

Dinner Tickets \$50 x _____ = _____
 (price is listed per person x people attending)

SPS Membership Renewal

Renew your 2017 Membership by checking your membership type below.

Member \$125
 Student Member \$62.50
 Retired Member \$62.50

DSP Certification Exam

Register for your 2017 DSP Certification Exam by checking the box below.

DSP Certification Exam (September 23) \$250

Fee(s) Total

Please total your fees from all categories included on this registration.

Registration \$ _____
 Continuing Education Courses \$ _____
 Lunchtime Mini Course Boxed Lunch \$ _____
 Berlin TV Tower Dinner \$ _____
 SPS Membership Renewal \$ _____
 DSP Certification Exam \$ _____

Grand Total \$ _____

Payment

Please make all checks payable to: Safety Pharmacology Society (US currency).

Check # _____

Purchase Order # _____

Credit Card: American Express Master Card Visa Discover

Name on Card (Print) _____

Credit Card # _____

Expiration Date _____ / _____

How did you hear about the Meeting?

- | | |
|--|--|
| <input type="checkbox"/> I am an SPS Member | <input type="checkbox"/> Email announcement |
| <input type="checkbox"/> From an SPS Member | <input type="checkbox"/> Other society's email announcement |
| <input type="checkbox"/> SPS website | <input type="checkbox"/> Ad in <i>Journal of Pharmacological and Toxicological Methods</i> |
| <input type="checkbox"/> Other society's website | <input type="checkbox"/> Flyer at other society's meeting |
| <input type="checkbox"/> Postcard | <input type="checkbox"/> Other: _____ |

RETURN THIS FORM WITH PAYMENT TO:

| | |
|---|--|
| Safety Pharmacology Society Meeting Registration 1821 Michael Faraday Drive, Suite 300 Reston, VA 20190-5348, USA | Email: spshq@safetypharmacology.org Fax: 703.438.3113 Faxed forms are accepted only if using credit cards. |
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REGISTER ONLINE: www.safetypharmacology.org

All hard copy and fax registration information will be entered online by SPS staff.

CANCELLATION/REFUND POLICY: All requests for cancellations and/or refunds must be received in writing at SPS HQ by September 1, 2017. These refunds will be processed, less a \$50 processing fee. Refund requests received after September 1, 2017, will not be processed.