13th IACIS International Conference on Surface and Colloid Science
83rd ACS Colloid and Surface Science Symposium
Columbia University, Lerner Hall
New York, NY - June 14-19, 2009

First Name _____ Last Name _____

Company/University _____ Local section _____

Street address _____

City _____ State _____ Zip _____

Phone (office) (___) _____ Fax (___) _____ Membership # _____

E-mail _____

*Please contact the Conference Management office at (202) 872 – 6111 or email b_philpot@acs.org if you require special accessibility accommodations to fully participate. Dates you will require accessibility*_____

STANDARD/ONSITE REGISTRATION FEES		TICKETED EVENTS
April 16– June 1		IACIS Banquet Tickets $100 Number of banquet tickets_____
❑ 01. Member	$795	
❑ 02. Nonmember	$895	Boxed Lunches ($12.00 each per day.)
❑ 03. Students	$250	
(Student registration applies to Undergraduates, Graduates and Post-Doc)		How Many? / Total
❑ 04. Guest	$100	Monday, June 15 _____ _____
Guest Name_____		Tuesday, June 16 _____ _____
		Wednesday, June 17 _____ _____
		Thursday, June 18 _____ _____
		Friday, June 19 _____ _____

PLEASE READ THE FOLLOWING IMPORTANT INFORMATION

- *ALL REGISTRATIONS MUST BE PREPAID BY EITHER CHECK OR CREDIT CARD IN ORDER TO BE PROCESSED.*
- MAIL OR FAX COMPLETED FORM TO AMERICAN CHEMICAL SOCIETY, OFFICE OF SOCIETY SERVICES, 1155--16TH STREET, N.W., WASHINGTON, DC 20036. PHONE: (800) 227-5558; FAX: (202) 872-6067.
- PLEASE SUBMIT A SEPARATE REGISTRATION FORM FOR EACH REGISTRANT.
- REQUEST FOR REFUND MUST BE SUBMITTED IN WRITING TO OFFICE OF SOCIETY SERVICES, AMERICAN CHEMICAL SOCIETY, 1155--16TH STREET, N.W., WASHINGTON, DC 20036. FULL REFUND THROUGH (JANUARY 1 –April 15, 2009, with a processing fee of $50 charged for cancellation. FROM April 16 – June 1, 2009, a $200 processing fee charged for cancellation. No refunds after June 1, 2009

TOTAL FEES: Registration $ _____

Special Events $ _____

TOTAL AMOUNT ENCLOSED $ _____

Paid by: ❑ American Express ❑ MasterCard ❑ Visa ❑ Check ❑ Diners

_____ EXP. DATE _____

Cardholder Name (please print):_____

Signature: