



**CONFERENCE REGISTRATION**  
**2<sup>nd</sup> International Conference of**  
**Fish & Shellfish Immunology**

**Registration Type:**

\_\_\_\_\_ **Student \$575**                      \_\_\_\_\_ **Member of ISFSI \$650**  
\_\_\_\_\_ **Non-member \$675**              \_\_\_\_\_ **Non-delegate \$250**

**Please select your meal option for the lobster bake:**

\_\_\_\_\_ **Lobster** \_\_\_\_\_ **Chicken** \_\_\_\_\_ **Steak** \_\_\_\_\_ **Vegetarian**

**First Name:** \_\_\_\_\_ **Surname:** \_\_\_\_\_

**Company or Institution:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**First Name:** \_\_\_\_\_ **Surname:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State/Province:** \_\_\_\_\_

**Zip/Postal Code:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Dietary Restrictions:** \_\_\_\_\_

# PAYMENT INFORMATION & PAYMENT ADDRESS

Check or Money Order Enclosed – Make checks payable to:

University of Maine

Conference Services

5713 Chadbourne Hall

Orono, ME 04469-5713, USA

Tel: 207.581.4093

Fax: 207.581.4097

For credit card payments, please complete Sponsorship Registration Form and mail or fax to Conference Services.

Visa

MasterCard

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

CSC #: \_\_\_\_\_ Name as it appears on the card: \_\_\_\_\_  
(Print clearly)

**To contact us directly for ACH payments or other payment information, call Kathie Wing at University of Maine Conference Services, Tel: 207.581.4093 between 8AM-12Noon EST.**

**Email: [Katherine.wing@umit.maine.edu](mailto:Katherine.wing@umit.maine.edu)**

**If you have any questions please contact either**

**Theresa McMannus on Tel: 207-581-4095 or email [mcmannus@maine.edu](mailto:mcmannus@maine.edu)**

**Anne Langston on Tel: 207-356-2982 or email [anne.langston@umit.maine.edu](mailto:anne.langston@umit.maine.edu)**