Computational Modelling of Sound Pattern Acquisition (2010)
Conference Registration Form
Fax Number 780-492-0806

1. PERSONAL INFORMATION:
Last Name: First Name:
Home Phone No: Work Phone No:
Affiliation / Institution:
Email Address:
Please indicate which address is provided below: □ Work Address □ Home Address
Address:
City: Province / State:
Country: Postal Code/Zip Code:

2. REGISTRATION FEES:
Registration Fees:
□ Regular Registration $70.00 (CAD) *Registration after January 5th will be $75 for Student/Post
□ Student/Post Doc $50.00 (CAD) Doc and $100 for Regular Registration.

Student registration will not be considered without the following information:
1. Student ID Number:
2. Name of Accredited Institution and Supervisor:

Please note any dietary restrictions:

3. PAYMENT INFORMATION:
Please select your payment method: □ Visa □ MasterCard □ American Express
Name as it appears on credit card:
Billing address of credit card:
Card Number: Expiry Date:
TOTAL PAYMENT: $ (CAD)

SIGNATURE: For those submitting their credit card information via fax or mail, please sign below:

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Registration forms with registration fees can be submitted in the following ways: EMAIL to phonmod@ualberta.ca. FAX to (780) 492-0806 attn: Alison Vickerman. If outside North America, fax to 01-780-492-0806. MAIL to Department of Linguistics, 4-63 Assiniboia Hall, University of Alberta, Edmonton AB, T6G 2E7, Canada.