

Belonging
Halifax, Nova Scotia, August 10-12, 2018

Name _____

Degree _____ Society _____

Address _____

City/State/Country _____

Zip/Postal Code _____

Phone _____ Email: _____

Number of Accompanying Guests: _____

Names of guests: _____

Need equipment for **power point presentation** _____ **video presentation** _____

Conference Fees

Conference Participant (CAN \$ 560) _____
Fee includes registration, coffee breaks, Saturday and Sunday lunch, Friday cocktail and dinner event, Saturday dinner event and end of conference cocktail party

Guest NonParticipant (CAN \$ 270) _____
This is for family members and friends who will attend Friday, Saturday, and Sunday evening events but will not attend paper presentations.

There is an \$80 discount for children under 12

Total: _____

Please address the check to “**Joint International Conference**” and mail it along with the completed Registration Form to: Ionas Sapountzis PhD, 721 Franklin Avenue, Garden City, NY 11530 **by June 1st**. Please note that our bank **does not accept** personal checks or money orders from banks from abroad. The check you will be sending us needs to be in **US dollars**, include an **ABA number**. It will be best if the check is drawn by a **US bank** or by a Canadian bank through a **US bank subsidiary**