

Enter **ONLY** if you submitted this abstract, otherwise leave blank. Only **ONE** registration can be matched to an abstract.

2014 JOINT AQUATIC SCIENCES MEETING REGISTRATION FORM

If you are unable to register electronically on the web at <http://www.sgmeet.com/jasm2014>, please mail completed registration form and payment to: 2014 Joint Aquatic Sciences Meeting, 5400 Bosque Blvd, Suite 680, Waco, Texas 76710-4446, USA. Registrations complete with purchase order or credit card information that are not accompanying an abstract submission can be faxed to: 254-776-3767.

Please make checks payable in U.S. dollars and drawn on a U.S. bank to: JASM 2014. Please print or type.

LAST NAME	FIRST NAME	MIDDLE INITIAL
NAME FOR BADGE		
INSTITUTE OR ORGANIZATION		
DEPARTMENT OR FIRST ADDRESS LINE		
SECOND ADDRESS LINE		
CITY	STATE/PROVINCE	ZIP
E-MAIL		PHONE
		FAX

MEMBERSHIP STATUS:

Select all that apply. I am a member of: SFS ASLO SWS PSA

PARTICIPATION:

- | | | |
|---|--|--|
| <input type="checkbox"/> I am willing to be listed as a resource for the media. | <input type="checkbox"/> I am a student and interested in being a volunteer. | <input type="checkbox"/> I am a post-doc or professional willing to serve as a poster judge. |
| <input type="checkbox"/> I am a student and would like to be matched with a mentor. | <input type="checkbox"/> I would like to receive information on early career activities. | <input type="checkbox"/> I would like to receive information on student activities. |
| <input type="checkbox"/> I am an early career participant and would like to be matched with a mentor. | <input type="checkbox"/> I need a Letter of Invitation to apply for a visa. | <input type="checkbox"/> I am interested in sharing a hotel room to defray costs. |
| <input type="checkbox"/> I am a post doc, experienced scientist or professional willing to be a mentor. | <input type="checkbox"/> I am an undergraduate, graduate student, or post doc and would like to attend a mentor/mentee dinner. | |

FEES (IN U.S. DOLLARS AND PER PERSON):

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Society Members..... | <input type="checkbox"/> On or before 14 March 2014: \$400 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$500 | <input type="checkbox"/> On-site: \$600 |
| <input type="checkbox"/> Non-Members..... | <input type="checkbox"/> On or before 14 March 2014: \$505 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$605 | <input type="checkbox"/> On-site: \$705 |
| <input type="checkbox"/> Emeritus/Retiree..... | <input type="checkbox"/> On or before 14 March 2014: \$275 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$375 | <input type="checkbox"/> On-site: \$475 |
| <input type="checkbox"/> Post Doc..... | <input type="checkbox"/> On or before 14 March 2014: \$275 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$375 | <input type="checkbox"/> On-site: \$475 |
| <input type="checkbox"/> Member Students..... | <input type="checkbox"/> On or before 14 March 2014: \$275 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$375 | <input type="checkbox"/> On-site: \$475 |
| <input type="checkbox"/> Non-Member Students..... | <input type="checkbox"/> On or before 14 March 2014: \$345 | <input type="checkbox"/> Between 15 March – 17 May 2014: \$445 | <input type="checkbox"/> On-site: \$545 |
| <input type="checkbox"/> Guest/Social (Spouses/guests are not admitted to the sessions)..... | | | \$95 |
| Spouse/Guest Name: _____ | | | |
| <input type="checkbox"/> One-Day Registrations (One day only please: <input type="checkbox"/> Sun 18 May <input type="checkbox"/> Mon 19 May <input type="checkbox"/> Tue 20 May <input type="checkbox"/> Wed 21 May <input type="checkbox"/> Thu 22 May <input type="checkbox"/> Fri 23 May)..... | | | \$125 |
| <input type="checkbox"/> Member | <input type="checkbox"/> Non-member | <input type="checkbox"/> Emeritus-Retiree: | <input type="checkbox"/> Post Doc |
| <input type="checkbox"/> Member Student | <input type="checkbox"/> Non-member Student | <input type="checkbox"/> H.S. Student, H.S. Teacher | <input type="checkbox"/> Developing Country |
| <input type="checkbox"/> Developing Country..... | | | \$100 |
| <input type="checkbox"/> High School Teacher or Student..... | | | \$125 |
| <input type="checkbox"/> Abstract Fee (Required for registrations accompanied by an abstract submittal) | | | |
| <input type="checkbox"/> Professional..... | | | \$50 |
| <input type="checkbox"/> Student..... | | | \$30 |

TICKETED EVENTS:

- JASM 5K Fun Run (21 May 2014) # _____ of entries @ \$30/person
- T-shirt(s) (One per entry. Specify size: _____ Small, _____ Medium, _____ Large, _____ X-large)

WORKSHOPS:

- | | |
|--|-----------------------------------|
| <input type="checkbox"/> The Clean Water Act Puzzle - Professionals..... | # _____ of entries @ \$120/person |
| <input type="checkbox"/> The Clean Water Act Puzzle - Students..... | # _____ of entries @ \$75/person |
| <input type="checkbox"/> Beginner's R for Analysis & Graphics - Professionals..... | # _____ of entries @ \$120/person |
| <input type="checkbox"/> Beginner's R for Analysis & Graphics -Students..... | # _____ of entries @ \$75/person |
| <input type="checkbox"/> Identification of Ephemeroptera Larvae from Western North America, North of Mexico - Professionals..... | # _____ of entries @ \$120/person |
| <input type="checkbox"/> Identification of Ephemeroptera Larvae from Western North America, North of Mexico - Students..... | # _____ of entries @ \$75/person |

FIELD TRIPS:

- | | |
|--|----------------------------------|
| <input type="checkbox"/> North Portland Wetland Mitigation Tour..... | # _____ of entries @ \$60/person |
| <input type="checkbox"/> Marmot Dam Removal Site Field Trip..... | # _____ of entries @ \$45/person |

Total in U.S. Dollars _____

PAYMENT:

- Amount Enclosed Bill My Organization. (You must attach a purchase order and submit payment before event.)
- Credit Card Payment: Visa MasterCard American Express Discover

NAME ON CARD _____

CARD NUMBER _____ EXP. DATE _____

SIGNATURE _____

CONFIRMATION:

A confirmation will be sent to your e-mail address unless specified.
I prefer that my registration confirmation by: Fax Mail
Send a duplicate confirmation to the email address below:

DUPLICATE CONFIRMATION EMAIL ADDRESS _____

& SPECIAL NEEDS:

If you have a disability or limitation that may require special consideration in order to fully participate, contact the meeting's planning organization to see how we can accommodate your needs. Call 254-399-9635 or contact via e-mail at jasm14@sgmeet.com