

8th Annual Meeting of the Canadian Animal Health
Laboratorians Network (CAHLN)

June 7-10, 2009

REGISTRATION FORM

Name:	
Organization:	
Address:	City:
Province/State:	Postal/Zip Code
Phone Number:	Fax Number:
Email:	

Session(s) you plan to attend:

- Sunday, June 7, 5:30 to 9:00 p.m., Welcome Reception (Light Supper, Guest Speaker and Networking)
- Monday, June 8
- Tuesday, June 9
- Wednesday, June 10

Payment and Methods of Payment:

Conference Registration Fee (entitles to proceedings, lunches, health breaks and welcome reception)

\$ 95.00 - General \$
\$ 50.00 - Graduate Students and residents \$

Lobster Supper

\$ 20.00 (registrants) \$
\$ 30.00 (non-registrants or additional person) \$

- Yes, I will attend the banquet, June 9
- Request for vegetarian meal
- No, I will not attend the banquet, June 9

TOTAL \$

- Visa
- Mastercard
- Cheque enclosed

Card Number:

Name on the Card:

Expiry Date:

Signature :

Please forward completed registration form to CAHLN 2009 Annual Meeting before May 1, 2009 using any of the following methods:

Email: cahln2009@upe.ca

Fax:

CAHLN 2009 Annual Meeting
c/o Dr. Carmencita Yason
Atlantic Veterinary College, UPEI
902-566-0871

Mail or courier:

CAHLN 2009 Annual Meeting
c/o Dr. Carmencita V. Yason/
Paulette MacDonald-Sheppard
AVC Diagnostic Services
Atlantic Veterinary College
University of Prince Edward Island
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Charlottetown, PEI C1A 4P3

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