

21<sup>st</sup> ICFA Beam Dynamics Workshop on  
Laser-Beam Interactions at  
The State University of New York at Stony Brook and Brookhaven National Laboratory  
Long Island, NY USA

June 11-15, 2001

## Registration Form

Please mail or FAX this form, and direct any registration questions, to:

Ms. Pamela Wolfskill  
Office of Conferences & Special Events  
SUNY Stony Brook  
440 Administration  
Stony Brook, NY 11794-1603  
U.S.A

FAX: 631-632-9503

Phone: 631-632-6320

Items in **Blue** are mandatory fields and must be filled in.

Preferred Title Prof. \_\_\_\_ Dr. \_\_\_\_ Mr. \_\_\_\_ Mrs. \_\_\_\_ Ms. \_\_\_\_

**Family Name** \_\_\_\_\_

**First Name** \_\_\_\_\_

M.I. \_\_\_\_\_

**Citizenship** \_\_\_\_\_

**Affiliation for Name Tag -**

Institute/Laboratory/University/Company Name \_\_\_\_\_

**Address** \_\_\_\_\_

---

**City** \_\_\_\_\_

**State/Province** \_\_\_\_\_

**Postal Code** \_\_\_\_\_ **Country** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Person to Contact \_\_\_\_\_

Emergency Number \_\_\_\_\_

**See the ICFA website for [Hotel](#) and [Travel](#) Information.**

If you require on-campus dormitory accommodations, please visit the Accommodations page on our website and download the "On-campus housing" form.

Do you need a campus parking permit? Yes \_\_\_\_ No \_\_\_\_

Do you need daily transportation from selected hotel to campus? Yes \_\_\_\_ No \_\_\_\_

Do you intend to submit an abstract(s)? Yes \_\_\_\_ No \_\_\_\_

Do you require a formal letter of invitation to the Conference? Yes \_\_\_\_ No \_\_\_\_

**Names of Accompanying Persons:** ( not participating in the Scientific Program )

\_\_\_\_\_

\_\_\_\_\_

Number of people interested in the [Companion Program](#) \_\_\_\_\_

## Registration Fees:

---

Registration Fee covers all meeting materials, sessions, reception, coffee breaks, 4 lunches (\$16 each), conference banquet, excursion tickets, bus transportation to selected hotels and other conference costs.

Advance Registration Fee (by March 15, 2001)	<b>\$400.00</b>
Late Registration fee (after March 15, 2001)	<b>\$500.00</b>
Student registration fee (by March 15, 2001)	<b>\$250.00</b>

A limited amount of funding is available to students, as well as young and experienced scientists. Please refer to the "Financial Support" section of our website for details.

Number of additional **Banquet** tickets ( **\$50.00** ) \_\_\_\_\_

Number of additional **Excursion** tickets ( **\$50.00** ) \_\_\_\_\_

**Total \$** \_\_\_\_\_

### **Method of Payment: (Circle one) Credit Card or Check**

**Note:** Registration cannot be processed without payment.

Check in US dollars or credit card is the preferred method of payment.

Please contact the Office of Conferences & Special Events if you have difficulty

#### For Check Payment:

Make checks payable to:

**Stony Brook Foundation Account # 296440**

Reference "ICFA Conference" on bottom of check

#### **For Credit Card Payment Only**

Card Type: Visa \_\_\_\_ MasterCard \_\_\_\_

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

Signature: \_\_\_\_\_ Amount: \_\_\_\_\_

The University at Stony Brook is an affirmative action/equal opportunity educator and employer. If an accommodation resulting from a disability is needed, please contact the Office of Conferences & Special Events at 631-632-6320.