

CANADIAN ECONOMICS ASSOCIATION MEETING *May 31 – June 2, 2002*
Delegate Registration Form #02010

Please type or print clearly

Dr. Name _____ For Badge _____
 Prof. First Name _____ Last Name _____
 Mr. Organization _____
 Mrs. Dept. _____
 Ms. Address _____
City _____ Province(State) _____ P.Code/Zip _____
Country _____ Telephone () _____ Fax _____
email _____

REGISTRATION FEES: Includes: 2 Receptions, Sessions, Coffee Breaks,
All fees are quoted in Canadian dollars. GST # R108102864

	Before May 1	After May 1	
Full Registration	<input type="checkbox"/> \$85 (\$79.44 + \$5.56 gst)	<input type="checkbox"/> \$110 (\$102.81 + \$7.19 gst)	
\$ _____			
Students with ID # _____	<input type="checkbox"/> \$50 (\$46.73 + \$3.27 gst)	<input type="checkbox"/> \$ 85 (\$79.44 + \$5.56 gst)	\$ _____
CPEG	<input type="checkbox"/> \$115 (\$107.48 + \$7.52 gst)		\$ _____

SOCIAL EVENTS (Refer to information materials) For planning purposes please indicate:

I will attend the following which are included in my registration fee:

- Reception (May 31) Reception (June 1)

Optional Tickets:

Vegetarian meals required YES

CWEN Lunch	_____ person(s) x \$20 (\$18.69 + \$1.31 gst)	=	\$ _____
Doug Purvis Lunch	_____ person(s) x \$25 (\$23.36 + \$1.64 gst)	=	\$ _____
Guest Reception <input type="checkbox"/> May 31, <input type="checkbox"/> June 1	_____ person(s) x \$20 (\$18.69 + \$1.31 gst) each	=	\$ _____
CAES Dinner	_____ person(s) x \$35 (\$32.71 + \$2.29 gst)	=	\$ _____

Total Amount for all of the above \$ _____

I consent to distribute a participant list including my name, and/or organization, address, fax, email Yes No
Are you a member of the Canadian Economics Association? Yes No

Payment Method

Payment in Canadian funds must accompany this form.

- Visa Mastercard Cheque (Payable to University of Calgary)

Credit Card Number _____ Expiry Date _____

Name of Cardholder _____ Signature _____

Cancellations:

A \$50 administration fee will be withheld for cancellations received in writing prior to **May 13, 2002** No
refunds will be issued after this date.

REGISTRATION

Register online by credit card at <http://www.pware.com/1540> or mail or fax this form.

PRE-REGISTER to confirm attendance!

DO NOT send accommodation deposits with this form. Mail Separately.

MAIL OR FAX COMPLETED FORM TO: Margaret-Anne Stroh
University of Calgary
Conference Management Services
1833 Crowchild Trail N.W.
Calgary, AB T2M 4S7

For information - email: mastroh@ucalgary.ca

FAX: 403-284-4184