

**Society for Behavioral Neuroendocrinology
Annual Meeting Registration
June 26 - June 30, 1999**

Name _____
 Last name (Family name) _____ First Name _____ Middle Initial _____

Institutional Affiliation _____
 For your nametag _____ Dr. Ms. Mr. None
 Title for nametag: _____

Mailing Address _____

City _____ State _____ Zip Code/Postal Code _____ Country _____

Telephone (____) _____

FAX (____) _____

E-mail _____

Fees	Postmark by April 2, 1999	Postmark after April 2, 1999	Your amount
SBN Member registration ^a (includes post-docs)	\$170	\$195	\$ _____
Nonmember registration ^b	\$220	\$245	\$ _____
Graduate Student member registration ^a	\$ 75	\$100	\$ _____
Graduate Student nonmember ^b	\$125	\$150	\$ _____
Undergraduate registration	\$ 75	\$100	\$ _____
Additional banquet ticket ^c	\$ 40	\$ 40	\$ _____
Tour of Monticello	\$ 15 x Number _____		\$ _____
TOTAL AMOUNT ENCLOSED			\$ _____

Check here if you prefer a vegetarian banquet meal _____

^a If you have paid 1999 SBN dues or if you include your renewal dues (as a separate check made out to SBN membership) with this form. Registration fees include opening reception/registration, morning and afternoon coffee breaks, poster session refreshments and banquet dinner.

^b New members may receive membership registration rate by including a Membership Application, c.v., and membership dues (as a separate check made out to SBN membership) along with registration fees. (See <http://www.sbne.org> for details)

^c Use this only to purchase additional banquet tickets. One banquet ticket is included in the registration fee.

Payment: Fees are listed in US dollars. Fees are payable by check in US\$ made payable to:
Society for Behavioral Neuroendocrinology.

Early registration must be postmarked by April 2, 1999

**Mail to: SBN 1999 Annual Meeting
 Department of Biology, Gilmer Hall
 University of Virginia
 Charlottesville, VA 22903-2477**