



OSCAR

REGISTRATION

OSCAR User Group Meeting

January 17th, 2011

1475 Upper Ottawa Street, Hamilton, ON

Dr. Mr. Mrs. Miss. Ms.

Surname

Given

Profession: _____

Address:

City:

Province:

Postal Code

Area Code: Phone:

Area Code: Fax:

Email:

Please identify any accessibility needs:

Special Dietary Requirements:

Vegetarian: _____

Other: _____

Registration Fee

Physicians Day Session:

\$75

Non-Physicians Day Session:

\$50

Student:

\$25

Evening Session:

No Charge

REGISTRATION Deadline:

January 12, 2011

Please make cheques payable to:

McMaster University

CONFIRMATION OF REGISTRATION

A written acknowledgement of your registration will be sent via email to registrants prior to the event.

Volunteer Opportunities:

https://spreadsheets.google.com/ccc?key=0AIVGg_RTQF5bdDYwYUdRZUxXd0VIRVZNRWh0cHdlSVE&hl=en&authkey=CLDYvakl

Please fax or email completed registration forms to:

Kim Wilms

wilmsk@mcmaster.ca or fax: (905)521-5594