

Kentucky SMRT Chapter
Annual Meeting Registration Form
Saturday, October 29th, 2011

First Name _____

Last Name _____

Credentials _____

Address _____

City _____

State _____

Zip _____

Permanent Email address _____

Phone (_____) _____

School Affiliation _____

Imaging Facility Affiliation _____

SMRT# _____

Box Lunch options (please select one):

Turkey __ Ham __ Roast Beef __ Veggie __

Lunch not guaranteed if registering on day of event

\$60 Students with registration postmarked by October 8, 2011

\$75 Students with registration postmarked after October 8, 2011

\$75 Technologists with registration postmarked by October 8, 2011

\$90 Technologists with registration postmarked after October 8, 2011

Check number _____

Please mail completed form with payment made out to Kentucky SMRT Local Chapter to:

Kentucky SMRT Local Chapter
PO Box 75194
Fort Thomas, KY 41075