

## Registration

## *Enter the Future-Press Any Key September 22-26, 2000*

Name: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Conference Fees

Conference Registration includes one ticket to the Welcome Reception held at the Omni Netherland Plaza Hotel, one ticket to the Gala Dinner Cruise on the Belle of Cincinnati, the entire program, exhibits, continental breakfasts, the Chapter Business Meeting Luncheon and the Vendor Luncheon.

- Advance Registration**  
Postmarked by 8/15/00 Member: \$175 Non-member: \$220 \$ \_\_\_\_\_
- Registration**  
Postmarked after 8/15/00 Member: \$225 Non-member: \$250 \$ \_\_\_\_\_
- Student Registration**  
(excludes social events) Member: \$50 Non-Member: \$50 \$ \_\_\_\_\_

### **One Day Registration**

(excludes social events)

- Sunday only, September 24 Member: \$90 Non-member \$90 \$ \_\_\_\_\_
- Monday only, September 25 Member: \$90 Non-member: \$90 \$ \_\_\_\_\_
- Tuesday only, September 26 Member: \$90 Non-member: \$90 \$ \_\_\_\_\_

### **Continuing Education Courses**

The CE courses will cost \$75 for the 4 half-day (3.5 or 4 hours) courses and \$130 for the one full-day Evidence-based Medicine course.

#### **Saturday, September 23, 2000**

- CE 1 Complementary and Alternative Medicine (CAM):  
Information Resources for Choices in Healing \$ \_\_\_\_\_
- CE 2 Evidence-based Medicine for Librarians \$ \_\_\_\_\_
- CE 3 Making PubMed Work for You \$ \_\_\_\_\_

**Sunday, September 24**

CE 4 Consumer Health Information \$ \_\_\_\_\_

CE 5 The Amazing Document Delivery Maze \$ \_\_\_\_\_

**Additional Tickets for Special Events**

**Welcome Reception at Omni Netherland Plaza Hotel**  
(Note: One ticket already included  
in full Conference Registration) \_\_\_\_\_ tickets @ \$35 each \$ \_\_\_\_\_

**Gala Dinner Cruise on the Belle of Cincinnati**  
Note: One ticket already included  
in full Conference Registration) \_\_\_\_\_ tickets @ \$55 each \$ \_\_\_\_\_

**Cincinnati Museum Center - Rotunda Tour**  
(Note: All additional attractions have an admission fee of \$6.50)  
Free tickets  
Number attending \_\_\_\_\_

**Children's Hospital Medical Center and  
University of Cincinnati campuses tour** Free tickets  
Number attending \_\_\_\_\_

<b>Grand Total</b>	\$ _____
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**Mail Registration Form and Check to:**

**Regina M. Hartman**  
James N. Gamble Library  
The Christ Hospital  
2139 Auburn Ave.  
Cincinnati, OH 45219  
hartmanr@healthall.com

Checks/money orders for all fees are payable to Midwest Chapter Medical Library Association. Cancellations must be received in writing no later than September 8, 2000 for a refund. No cancellations will be accepted after that date or during the conference. Refunds will be processed after the conference.

<b>In house use</b>	Check #: _____
Processed by: _____	Check amount: \$ _____
Deposit date: _____	