



**SOCIETY FOR
PREVENTION
RESEARCH**


17th ANNUAL MEETING

Power of Relationships: Implications for Prevention Science

Washington, DC • Hyatt Regency Washington
May 26 - 29, 2009 • Pre-Conference Workshops, May 26, 2009
Register by Fax (256)852-6838 Online at www.preventionresearch.org

For the advancement of prevention science worldwide

First Name _____ Last Name _____
 Organization _____ Division/Department _____
 Position/Title _____ Degree(s) _____
 Street Address _____
 City _____ State/Province _____ ZIP/Postal Code _____
 Country _____ Telephone _____ Fax _____
 Email Address _____

Gender (check one) Male Female  Special Needs: Please contact us at (703)934-4850 or jenniferlewis@preventionresearch.org
 Ethnicity (optional) Black, African American Spanish, Hispanic, Latino
 White, Caucasian American Indian, Native American
 Asian, Pacific Islander Other

Conference Selection Register by April 20 for Early Bird rate or by May 22 for Full rate.

	Early Bird	Full	On-Site	Fee
Member.....	<input type="checkbox"/> \$295	<input type="checkbox"/> \$375	\$395	_____
Non-Member.....	<input type="checkbox"/> \$395	<input type="checkbox"/> \$445	\$495	_____
Student Member.....	<input type="checkbox"/> \$150	<input type="checkbox"/> \$175	\$190	_____
Student Non-Member.....	<input type="checkbox"/> \$200	<input type="checkbox"/> \$215	\$230	_____
Registration & Membership.....	<input type="checkbox"/> \$440	<input type="checkbox"/> \$520	\$540	_____
Registration & Student Membership.....	<input type="checkbox"/> \$220	<input type="checkbox"/> \$245	\$260	_____

Membership # _____ 2009 membership dues must be paid to receive the member rate.

Pre-Conference Selection Check the Pre-Conference session you would like to attend.

Pre-Conference #1 Pre-Conference #2 Pre-Conference #3

Member.....	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	\$175	_____
Non-Member.....	<input type="checkbox"/> \$220	<input type="checkbox"/> \$245	\$260	_____
Student.....	<input type="checkbox"/> \$75	<input type="checkbox"/> \$100	\$115	_____

Tickets and Events

International Networking Forum..... \$20 _____
 ECPN Lunch..... \$20 _____
 Annual SPR Dance..... \$20 _____
 Continuation Education Units..... \$100 _____

Grand Total _____

Payment Information Registration forms received without payment won't be processed.

Make checks payable to SPR c/o CONDOR Registration Services.
 Payment Type Check VISA Master Card American Express
 Cardholder's Name _____
 Card Number _____
 Expiration Date ____ / ____ Verification Code _____ Billing ZIP _____
 Signature _____

Rates are in US Dollars. All payments must be made in US Dollars via credit card or check drawn on a US bank. Cancellations must be received in writing by April 27 and are subject to a \$50 administrative fee. After April 27 registration fees are non-refundable. Refunds will be processed after the annual meeting. No refunds will be made for no-shows. A returned check fee of \$30 will be assessed for all returned checks.

General meeting questions, contact Jennifer Lewis, (703)934-4850 x213, jenniferlewis@preventionresearch.org

Membership questions, contact Dee Jay Garringo, (703)934-4850 x218, dj@preventionresearch.org

Registration questions, contact CONDOR Registration Services, (256)852-4490, info@condorregistration.com

Mail Registration Form to: SPR c/o CONDOR Registration Services, PO Box 3348, Huntsville, AL 35810

Fax to: (256)852-6838 **Register Online at:** www.preventionresearch.org