

Conference on Dredged Material Management: Options and Environmental Considerations

3-6 December 2000

Contact Information *Please type or print legibly*

First Name: _____

Family Name: _____

Badge Nickname: _____

Title: _____

Institution: _____

Address Home Business
(Remember to include any company mail codes):

City: _____ State: _____

Zip Code: _____ Country: _____

Phone: _____ Fax: _____

Email: _____

Conference Registration

Registration fee includes admission to all technical sessions, a workshop, proceedings, Sunday cruise, Monday reception and continental breakfasts, lunches, and refreshment breaks on Monday-Wednesday

- Full Conference @ **\$275.00 (on or before 1 November)**
- Late Registration/Full Conference @ **\$325.00 (after 1 November)**
- Student Registration @ **\$150.00**

Will you be attending the Sunday Harbor Cruise? YES NO

Single-day registration fee of \$100 includes technical sessions for the day chosen only and breakfast and lunch on that day (proceedings and special events not included). You may only register for one, single-day registration.

- Single-day only @ **\$100.00**. Please indicate which day you will attend:
 - December 4 December 5 December 6

Are you attending a workshop on Friday? Please indicate which one:

- #1: The Use of Confined Aquatic Disposal
- #2: Sediment Toxicity and Risk Assessment Tools
- #3: The Use of Dredged Materials for Erosion Control and Wetlands Creation

Guest Registration/Extra tickets

Guest Name: _____

- Additional Harbor Cruise Ticket(s) # _____ X **\$30.00**
- Additional Reception Ticket(s) # _____ X **\$30.00**

PAYMENT All forms submitted must include payment. Please retain a copy of this form and information on cancellation policies for your records

PAYMENT INFORMATION

CHECK PAYMENTS: A check in the amount of _____ US\$ drawn on a US bank and made payable to MIT, is enclosed.

Conference: \$ _____

CREDIT CARD PAYMENTS (Mastercard, VISA or American Express ONLY)
 If you are paying by credit card you may mail or fax your registration to **617-253-7002**

Extra Tickets: \$ _____ Please charge my credit card for \$ _____

Total Due: \$ _____ Credit Card Number: _____ Exp Date: _____

Name on Credit Card: _____

Authorized Signature (required) _____

Please mail form and payment to:

MIT Conference Services/Dredged Material Management
Room 7-121
77 Massachusetts Avenue
Cambridge, MA 02139-4307
 Phone: 617-253-2003
 Email: conf-serv-www@mit.edu
 Fax: 617-253-7002
 (faxed registrations must be accompanied by credit card payment)
 MIT Federal ID #: 042103594