

6.0 APPENDIX A

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REGISTRATION FORM

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HOME ADDRESS: _____

TELEPHONE: _____ **FAX:** _____

EMAIL ADDRESS: _____

INSTITUTIONAL AFFILIATION: _____

RESEARCH INTEREST (optional): _____

STATUS (check one):

Student:

Faculty:

Staff:

Alumnus:

Other:

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Signature of Patron: _____ **Date:** _____