

2018 SGAS SYMPOSIUM REGISTRATION FORM

Please return with your payment by 4 April 2018

Name: _____ (First) _____ (Last)

Affiliation: _____

Email: _____

REGISTRATION (*Onsite or late is \$70*)

Full Conference Fee _____ \$ 65

Friday OR Saturday only (Circle Day) _____ \$ 35

Student (with verification) _____ \$ 15

FRIDAY Luncheon / Business Meeting _____ \$ 14

Sandwich, chips, dessert, and bottle of water

Please Indicate Sandwich Choice:

_____ Shaved Turkey

_____ Roasted Ham

_____ Egg Salad

*MEMBERSHIP LEVELS

Student _____ \$ 15

Individual _____ \$ 30

Joint _____ \$ 40

Institutional _____ \$ 40

Life Member _____ \$ 500

(may be paid in 5 installments)

SATURDAY Evening Banquet: **Priced according to Entree**

Entree Choice:

1. Vegetarian Greek Pasta + Beverage _____ \$ 17

2. Schnitzel (2 sides, salad OR soup) +
Beverage _____ \$ 26

3. Lemon Pepper Shrimp (wild rice,
2 sides, salad OR soup) +
Beverage _____ \$ 29

SATURDAY Excursion (1:30 – 3:30) _____ \$ 15

MEMBERSHIP* (if not currently active) _____ \$ _____

Total Enclosed \$ _____ .00

European Membership Levels differ.
Payable in EURO online www.sgas.org
OR contact Katja Hartmann
munsalvaesche@t-online.de

*Please make check or money order
payable to "SGAS" and mail to:*

**Karyl Rommelfanger
4824 Morgan Dr.
Manitowoc, WI 54220-1026**