

**SoCRA - Society of Clinical Research Associates**  
**15th Annual Conference Registration Form**  
**Clinical Research: Changing the Future....Touching Lives**  
**CONFERENCE - SEPTEMBER 22, 23, and 24, 2006 (Friday through Sunday)**  
**Pre-conference Seminars - September 21 (Thursday)**

**Chicago Marriott Downtown Magnificent Mile - 540 North Michigan Avenue, Chicago, Illinois, 60611**  
 Phone +1 312 836 0100 Fax +1 312 836 6139 (Please mention "SoCRA")  
 Hotel room rate \$152 U.S. Funds, available to August 30 or until the room block is filled

REGISTRATION for Dr. \_\_\_ Mr. \_\_\_ Ms. \_\_\_ or REGISTER ON-LINE AT [WWW.SOCRA.ORG](http://WWW.SOCRA.ORG) SEE ANNUAL CONFERENCE 2006

Name \_\_\_\_\_  
 (First, Middle Initial, Last, Degrees)

Company / affiliation \_\_\_\_\_

Title \_\_\_\_\_

Preferred address (please check) - Office  Residence

Postal address \_\_\_\_\_

City \_\_\_\_\_ State/Postal area \_\_\_\_\_

Zip/mail code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Certifications \_\_\_\_\_

*Please utilize this form as your invoice and keep a copy of this form as your receipt.*

|  |                        |                 |       |
|--|------------------------|-----------------|-------|
| Annual Conference registration -                     | Early discounted rates | After August 20 |       |
| Member _____   | \$595                  | \$625           | _____ |
| Non-member (Includes membership for one year) _____  | \$670                  | \$700           | _____ |
| Pre-conference workshops (Thursday, Sept. 21, 1-5PM) | Please add             | \$150           | _____ |

Workshop selection (one):  FDA GCP audits  IRB regulations  Project Management  New Study Coordinator workshop  
 Presentation Skills Workshop  SOP Workshop for Senior Site Managers

⇒ Fees are in U.S. dollars. Please make checks payable to "SoCRA" Total \_\_\_\_\_

The application for the CCRP Certification Examination (given on Thursday, September 21) is available on SoCRA's website and through the SoCRA office. In order to be considered for the examination, your application must be submitted prior to August 10.

- ⇒ Checks must be drawn on a U.S. bank or marked "Pay in U.S. Funds".
- ⇒ Membership fees are processed immediately, are effective for one year, and are not refundable.
- ⇒ Written cancellation requests received by SoCRA prior to September 5 = \$425.00 refund (\$100 for pre-conference).
- ⇒ We regret that refunds cannot be issued for cancellations on or after September 5.
- ⇒ Taping (audio or video) is prohibited unless SoCRA's written permission has been acquired.
- ⇒ ADA - This program is accessible to persons with disabilities. Please request any special accommodation here (now):

- ⇒ \_\_\_\_\_
- ⇒ If for any reason this conference cannot be held, SoCRA is not responsible for costs incurred by attendees, such as airfares, or hotel or other reservations.
- ⇒ SoCRA is an educational non-profit membership organization - Federal Tax ID #61 1208981

If you are registering by credit card, please complete the following and mail or fax to SoCRA.

VISA \_\_\_ M/C \_\_\_ AMEX \_\_\_\_\_

Account # \_\_\_\_\_ Exp. Date \_\_\_ / \_\_\_

Cardholder Signature \_\_\_\_\_

**SoCRA - 530 West Butler Avenue, Suite 109, Chalfont, PA 18914**  
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