

SoCRA Standard Operating Procedures (SOPs) Development and Implementation

February 9 and 10, 2012 New Orleans, LA

Chateau Bourbon New Orleans

910 Iberville Street, New Orleans, LA 70112 USA Hotel Phone: +1 (504) 523 2400

June 7 and 8, 2012 Toronto, ON Canada

Fairmont Royal York

100 Front Street West, Toronto, ON M5J 1E3 CANADA. **Hotel Phone: +1 (416) 368 2511**
For Hotel Reservations, please contact the hotel or call 1 800 663 7229. Please mention SoCRA to receive the hotel room rate of **\$175 S/D CAD (plus applicable taxes)**, available until May 7, 2012 or until the SoCRA room block is filled.

Dr. _____ Mr. _____ Ms. _____

First Name _____ Middle Initial _____ Last Name _____

Degrees _____ Certifications _____

Title _____

Company / affiliation _____

Preferred mailing address (check one) : _____ Office _____ Residence _____

Address _____

City _____ State/Postal area _____

ZIP/Postal code _____ Country _____

Phone _____ Alt. Phone _____

Fax _____ E-mail _____

Check to register - New Orleans #12801 _____ Toronto #12802 _____

MEMBER	NON-MEMBER	AMOUNT
\$585	\$660	_____

- ⇒ Non member fees include a one year membership in SoCRA.
- ⇒ Membership fees are processed immediately and are not refundable.
- ⇒ Fees are in U.S. dollars. Please make checks payable to "SoCRA"
- ⇒ Checks must be drawn on a U.S. bank or marked "Pay in U.S. Funds".
- ⇒ Written cancellation requests received by SoCRA at least 10 business days prior to start of course may receive a \$410 refund.
- ⇒ We regret that refunds cannot be issued for cancellations on or after 10 business days prior to start of course.
- ⇒ Taping (audio or video) is prohibited unless SoCRA's written permission has been acquired.
- ⇒ ADA - This program is accessible to persons with disabilities. Please list any special needs:
⇒ _____
- ⇒ 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 (corporation) - Federal Tax ID #61 1208981.
- ⇒ Please consider this form your invoice and please retain a copy as your payment receipt.

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

VISA _____ M/C _____ AMEX _____

Account # _____ Exp. Date _____ / _____

Cardholder Printed Name _____ Billing ZIP/Postal Code _____

Cardholder Signature _____

Register Online at www.socra.org or Send Registration Form to SoCRA:

SoCRA - 530 West Butler Ave, Suite 109, Chalfont, PA 18914 U.S.A.

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