REGISTRATION FORM
Global Regulatory Perspectives Workshop

May 23, 2010
Philadelphia, PA

International Society for Cellular Therapy
ISCT

Registration must be postmarked no later than May 14, 2010
After May 14th, please register onsite.

Register online at:
www.celltherapy2010.com

Mail this form with payment to:
International Society for Cellular Therapy
375 W 5th Avenue Suite 201
Vancouver BC V5Y 1J6
Canada

Fax this form to:
1-604-874-4378

STEP 1 –FILL OUT THE FIELDS BELOW

Surname/Family Name First Name Initial

Primary Degree or equivalent: □ MD □ PhD □ MSc □ MBA □ BSc □ MT

Primary Area of Expertise: □ Laboratory □ Regulatory □ Research □ Clinical □ Industry

Job Title Department

Institution/Company

Address

City State Zip Country

Telephone Fax

Email

STEP 3 – PAYMENT

☐ **Check Payment**
Checks should be made payable to: **ISCT** (in US funds drawn on a US bank) **Fed. Tax ID No.: 52-1809771**

Credit Card Payment

☐ MasterCard ☐ Visa ☐ American Express

Credit Card Number

Expiration Date (mm/yy)

Name (as it appears on card)

Signature

STEP 2 – SELECT YOUR REGISTRATION FEE

Global Regulatory Perspectives Workshop on May 23, 2010 – 8:00am – 5:00pm

	Early Registration Rate – until April 15, 2010	Regular Registration Rate – April 16 to onsite
Member	q $165	q $240
Non-Member	q $215	q $290

CANCELLATION POLICY

A $75 administrative will be applied to any cancellations. No refund for cancellations received after **April 9, 2010**.