PA BIODIVERSITY PARTNERSHIP CONFERENCE 2004 REGISTRATION FORM

Please print or type and return this form along with your payment to the Pennsylvania Biodiversity Partnership, 16 Terminal Way, Pittsburgh, PA 15219-1209

Name:				
Affiliation:				
Address:				
City, State, Zip:				
Phone/Fax Number:				
Email Address:				
Email Address:	(confirmatio	on will be ser	nt via e-mail)	
To assist in planning, please indi	icate below whic	ch events yo	ou plan to attend and	your entrée choices.
Pre-Dinner Reception, 9 Nov:	Yes	No		
Dinner, 9 Nov, Entrée Choice:	Chicken Me	edallions	Vegetarian	Roast Sirloin of Beef
Post-Dinner Social, 9 Nov:	Yes	No		
Continental Breakfast, 10 Nov: _	Yes	No		
Lunch, 10 Nov, Entrée Choice: _	Chicken Pi	ccata	Vegetarian Lasagna	Yankee Pot Roast
Concurrent Session Preference morning and afternoon on Wednes and a PM your choice for the after	sday, 10 Nov. P			
Expert Knowledge about Biodiversity			Managing for Biodiversity	
Sharing Biodiversity Information			Government and Policy Issues	
Biodiversity Education and Public Support			Funding Biodiversity Conservation	
Registration Fee: The registration can join PBP and thus qualify for member registration + \$30 to join	the PBP member	rate by add	ing the \$30 membershi	p fee to your total (e.g., \$60
PBP Members	October 2004 \$60 \$95 \$30	After	29 October 2004 \$ 75 \$ 110 \$ 30	One Day Attendence \$ 30 \$ 50 \$ 30 \$ 30

TOTAL ENCLOSED

Make checks payable to: PBP/Tides Center PA and mail to PA Biodiversity Partnership 16 Terminal Way, Pittsburgh, PA 15219-1209 (PBP is a project of the Tides Center PA)