



**Registration Form:**  
**Space Cryogenics Workshop**  
**September 18 & 19, 2003**  
**Alyeska Resort, Alaska**

Name (Please print or type) \_\_\_\_\_  
 Name for Badge \_\_\_\_\_ Title \_\_\_\_\_  
 Affiliation \_\_\_\_\_  
 Street address \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_  
 Country \_\_\_\_\_ Zip \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Registration fees (in U.S. dollars):**

Early (before August 15)	\$210.00	_____
Late (after August 15)	\$245.00	_____
Guest Reception	\$15.00	_____
Guest Banquet	\$50.00	_____
<b>Total:</b>		\$ _____

**Payment Options** (please print clearly):

- Check**, make payable to:  
**“Cryogenic Society of America, Inc., Space Cryogenic Workshop”**  
(note: checks must be in U.S. Dollars and drawn on a U.S. bank.)
- Credit Card:**
  - American Express     Visa     Master Card     Discover

Card # \_ \_ \_ \_ - \_ \_ \_ - \_ \_ \_ \_ \_ Exp. date: (Month/Year:) \_\_\_\_\_

Signature: \_\_\_\_\_

Name as printed on card: \_\_\_\_\_

Billing address (if different from above)

Street Address \_\_\_\_\_

City/State(Province)/Zip/Country \_\_\_\_\_

**Fax or mail completed form to:**

Cryogenic Society of America  
 1033 South Blvd., Suite 13  
 Oak Park, IL 60302-2881, USA  
**FAX:** (708)383-9337,  
 Questions: Laurie Huget (708)383-6220, or [csa@huget.com](mailto:csa@huget.com)