REGISTRATION FORM

Registrant Information

PLEASE PRINT CLEARLY.

LAST NAME: ____________________________  FIRST NAME: ____________________________  M.I.: ____________________________

AFFILIATION

ADDRESS (STREET)

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

(CITY) ____________________________________  (STATE) ____________________________  (ZIP) ____________________________________  (COUNTRY) ____________________________________

PHONE: ____________________________  FAX: ____________________________

E-MAIL: ____________________________

Note that there is a late fee of $25.00 if registering after October 12, 2004.

Payment must accompany form.

before October 12, 2004

@ 150.00 (paid members of Roundtable)  
@ 200.00 (nonmembers)  
@ 80.00 (students and guests)  

after October 12, 2004

@ 175.00 (paid members of Roundtable)  
@ 225.00 (nonmembers)  
@ 105.00 (students and guests)  

Total Enclosed $ _________

Please Indicate Method of Payment

☐ Check or money order payable to the CSM Continuing Education  ☐ AmEx  ☐ VISA  ☐ MasterCard
   (checks must be in U.S. dollars drawn on a U.S. bank).  ☐ Cash  ☐ Traveler’s Check

Card Number ____________________________  Expiration Date ____________________________

Name As It Appears On Card ____________________________  (PLEASE PRINT)

Signature ____________________________  (CSM USE ONLY)  Authorization Code ____________________________

RETURN THIS FORM BY OCTOBER 12, 2004, to

Space Resources Roundtable VI,
Colorado School of Mines, Department of Special Programs and Continuing Education,
1500 Illinois St., Golden CO 80401 (phone: 303-273-3321; fax: 303-273-3314; e-mail: space@mines.edu)