

REGISTRATION FORM

Bridging Cultures: Trailblazers and Visionaries

East Rock Institute and Yale Korean Graduate Students Association (YKGSA) at Yale University

Friday April 8th-Sunday April 10th – Yale University New Haven, Connecticut

Please complete and fax or email this form to Debra Tillotson at East Rock Institute 203-624-7933, debra@eastrockinstitute.org by March 4th, 2005 and follow with a hard copy with check enclosed.

COMMUNICATION INFORMATION

Name: Last _____ First _____ Middle _____

Institutional Affiliation, if any _____

City, State, Zip: _____

Phone Number: _____ Fax: _____

Email Address: _____

Registration		
	With Lodging (includes continental breakfast , lunch and dinner	Without Lodging (Includes continental breakfast, lunch and dinner)
Adult & Young Professionals	\$120 per day \$300 (3 days)	\$100 per day
Students (Yale students contact YGKA and KASY for special rates)	\$100 (per day)	\$50 per day
Teachers please make enquiries with Debra at East Rock Institute for special rates and honorarium		

Registration: (Please check “x” in the appropriate space)

(1) Full registration: 3 days (April 8-9) with 3 nights lodging () \$300

OR

(2) Partial registration

Date	With lodging	Without lodging
April 7		
April 8		
April 9		

Total Paid _____

East Rock Institute 251 Dwight Street, New Haven, CT 06511

Phone: 203-624-8619 / Fax: 203-624-7933 Email: eri3@pantheon.yale.edu

HOTEL INFORMATION

HOTEL: We have a block booking at New Haven hotels at conference rates. There are a limited number of rooms available so we suggest that you return your form to us early, (before February 25th) to secure a room at this rate. After February 25th availability cannot be guaranteed and the price will increase. Rooms are available from 3pm Thursday April 7th to 12 noon Sunday April 10th.

Please note: The registration fee includes shared accommodation if you require a single room the price would be increased. If you do not have someone you would like to share with we will do the room allocation.

Please indicate which nights you require accommodation for:

April 7th _____ April 8th _____ April 9th _____

Name of attendee you would like to share with:

* Note we will provide details of the hotel you will be staying in with your receipt and confirmation.

MEALS

Please indicate which meals you will be present for so we can confirm details with our caterers.

Friday 4/8/05 Lunch	
Friday 4/8/05 dinner	
Saturday 4/9/05 lunch	
Saturday 4/9/05 dinner	
Sunday 4/10/05 lunch	