



THE ANIMAL HEALTH AND NUTRITION BUSINESS CONFERENCE

OCTOBER 6-8, 2009, CHARLOTTETOWN, PRINCE EDWARD ISLAND, CANADA

Registration Form

Registration can be completed online or by completing the below form and faxing to **(902)367-4404**. Fees may be paid by credit card (Visa, MasterCard and American Express) or by Cheque to the Prince Edward Island BioAlliance.

Registration Fees

Rates are set in Canadian dollars, and are subject to applicable taxes. Payments are to be made and only accepted in Canadian funds.

REGISTRATION TYPE	CAD\$	Number Required
Conference (includes all receptions, meals and partnering program)	\$750.00 *	
Welcome Reception (additional ticket only)	\$40.00 *	
Monday Night Reception & Dinner (additional ticket only)	\$100.00 *	
Closing Reception (additional ticket only)	\$50.00 *	

**plus applicable taxes*

Registration – VetHealth Global 2009	
Please complete the form below to register for VetHealth Global 2009. Your name, job title, company name and city/country will be used for your badge and the delegate list precisely as you enter it below . Please take care with spelling and usage of capital letters.	
General information	
Title*	
First name*	
Middle name	
Last name*	
Position/Function*	
Company/Organization*	
Division	
Website	

Address 1*	
City*	
Country*	
State	
ZIP code*	
Phone No.*	
FAX No.	
E-Mail*	

Special Events

All special events are included in the full conference registration for each delegate. To guarantee meals and for accuracy, please indicate which event(s) you will be attending:

Welcome Reception

VetHealth Global 2009 Gala Dinner Reception

Closing Reception

Special Dietary Requirements

In the box below, please let us know of any special dietary requirements that you have, such as food allergies or vegetarian dishes,

--

Payment: (SEND PAYMENT IN \$CDN)

TOTAL COST: _____ (Please add 5% GST to quoted price)

CHEQUE **VISA** **MASTERCARD** **AMEX**

MAKE CHEQUE PAYABLE TO: **PRINCE EDWARD ISLAND BIOALLIANCE**

CREDIT CARD NUMBER: _____

EXPIRY DATE: (MM/YY) _____

CARD HOLDER'S SIGNATURE: _____

CARD HOLDER'S PRINTED NAME: _____

Contact information:

Rose FitzPatrick,
VetHealth Global 2009 Conference Coordinator,
 134 Kent St, Suite 405
 Charlottetown, PEI C1A 8R8
 Telephone: (902) 367-4403 | Fax: (902) 367-4404