

**MID-ATLANTIC CHAPTER
MEDICAL LIBRARY ASSOCIATION
2001 ANNUAL MEETING**

October 17-20, 2001, Princess Royale, Ocean City, MD
<http://www.cbil.vcu.edu/mac/index.html>

Registration forms must be postmarked by September 7, 2001 to avoid late registration fee.

Name (as you wish it to appear on your badge)

Library

Institution

Mailing Address

City State Zipcode

Daytime Phone Email Address

REGISTRATION

Circle choice and enter fee on Line 1 of fees box	MAC Member registering before 9/7/01	MAC Member registering after 9/7/01 or Non-Member
Inclusive Conference: Sessions, Exhibits, and tickets to Welcome Reception, Round-Table Luncheon, Awards Banquet, and Business Luncheon	\$175	\$215
Sessions/Exhibits ONLY	\$130	\$160
One day registration: Circle Thursday or Friday Includes lunch	\$120	\$150
Student: Includes Sessions and Exhibits ONLY	\$35	\$40

CONTINUING EDUCATION

Indicate 1st and 2nd choice for each day. Enter total fees on Line 2 of fees box.

Choice	Day	Course Name	MAC/SLA Member	MAC/SLA Non-Member
	Wed. 1PM-5PM	Continuing Medical Education and Health Sciences Libraries: Partnership Opportunities	\$65	\$85
	Wed. 8AM-5PM	Building and Managing your Digital Library	\$130	\$170
	Sat. 8AM-12PM	Bioethics: An Introduction for Health Information Professionals	\$65	\$85
	Sat. 8AM-12PM	PDAs (Personal Digital Assistants)	\$65	\$85

Would you like an appointment to discuss membership in the Academy of Health Information Professionals (AHIP)?
Yes_____

Would you like a buddy (for first-timers)? **Yes**_____

Please indicate any special needs (dietary, access, others):

TICKETED EVENTS

Indicate the number of **additional** tickets below and enter total fees on Line 3 of fees box.

Event	Number of additional tickets needed	Price of tickets
Welcome Reception	#	@ \$30
Round Table Luncheon	#	@ \$20
Awards Banquet	#	@ \$40
Business Luncheon	#	@ \$20

ENTER FEES BELOW

1. Registration Fee	\$
2. CE Course Fee	\$
3. Extra Tickets	\$
4. TOTAL	\$

Make check payable to MAC/MLA
No government purchase orders

Return the other 3 copies of this form to:
Diane Fuller

Health Sciences & Human Services Library
University of Maryland
601 W. Lombard St.
Baltimore, MD 21201

Registration confirmation will be made by email if your email address is listed above. Otherwise, you will be notified by mail. Please keep the back copy of this form for your records.

For Registration Information call: 410-706-8862

CANCELLATION POLICY

All cancellation requests must be made in writing to Diane Fuller at the address below. Cancellations postmarked before 9/16/01 are subject to a \$50.00 fee for cancelled registration and a \$25.00 fee for a cancelled CE course. No refunds will be made for cancellations postmarked after 9/16/01.