The National Academies of
SCIENCES • ENGINEERING • MEDICINE

ARL DISTINGUISHED POSTDOCTORAL FELLOWSHIP

CONFERENCE REGISTRATION FORM

The Fellowships Office will register you and direct pay conference registration fees that are $250 or more. *Please note that conference registration cannot be initiated until you have received your approved Travel Authorization (TA) form.*

If registration can be done online, please complete the following information. If registration cannot be done online, please provide us with a completed conference registration form from the conference website.

Name		*Agency*	
Lab Address1		*Date*	
Lab Address2		*Phone*	
City, State, and Zip Code		*Email*	

Conference Name:
Start Date: End Date:
URL:
If online registration site requires a userID and password, list it here: UserID: Password:
Registration Type (member/non-member/professional/etc.): Member Affiliation Number (if applicable):
Registering for: ☐ Full conference ☐ Partial conference
Are any special workshop(s) included in the conference registration fee: ☐ Yes ☐ No
Do you have any dietary needs and/or special needs (e.g., wheelchair assistance, auxiliary aids, etc.)? ☐ Yes ☐ No
Total registration amount: **$**
Additional information:
Emergency Contact Name: Telephone Number: Relationship:
Return this form to fotrav@nas.edu no later than **three weeks before the registration deadline**. You will receive a confirmation e-mail acknowledging that your registration has been processed. Please note if you do not attend the meeting after submitting this form the registration fee will be deducted from your fellowship travel budget.