

DOE LIMS User Group Meeting Registration Form

Registration Form must be received by October 1, 2007.

(Please print or type and complete all sections)

PERSONAL INFORMATION:

Name (Last, First, Middle Initial): _____

Affiliation/Employer: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

E-Mail Address: _____

Telephone: _____ Fax: _____

SPECIAL NEEDS:

Indicate any special needs or dietary restrictions: _____ none _____

Indicate any audio-visual needs: _____

PRESENTATION:

Yes, I will present a presentation at the meeting.

Topic: _____

CLEARANCE INFORMATION:

I have a DOE standard badge with a _____ Q clearance _____ L clearance

I have no clearance

Social Security Number: _____ Citizenship: _____

Date of Birth: Month _____ Day _____ Year _____

(If you do not wish to send your SSN, please call (803) 952-6898 with information)

Mail Registration form to:

Karen Rowe

Bldg 707-35B Room 10

Aiken, SC 29808

or E-Mail Registration form to:

Karenc.Rowe@srs.gov

or Fax to:

(803) 952-7341