

**Joint Conference of the
Canadian College of Medical Geneticists (CCMG) and the
Canadian Society of Clinical Chemists (CSCC)
June 18-22, 2016, Edmonton, Canada**

Badge Request Form

SUBMISSION DEADLINE: MAY 31, 2016

Company Name _____

Complimentary Representative (Complimentary registration includes all events in the Exhibit Hall, Banquet, and Education Sessions)
Booth Staff (Booth Staff registration includes all events in the Exhibit Hall, Wine & Cheese and Education Session, does NOT INCLUDE Welcome Reception and Banquet)

Complimentary Registration - *Diamond Sponsors Only*

NAME _____ EMAIL _____
CITY/PROVINCE _____ COUNTRY _____
DIETARY RESTRICTIONS YES NO If YES, specify _____
ATTENDING: Welcome Reception (Sun. June 19) YES NO
Gala Banquet (Tue. June 21) YES NO

Complimentary Registration - *Diamond Sponsors Only*

NAME _____ EMAIL _____
CITY/PROVINCE _____ COUNTRY _____
DIETARY RESTRICTIONS YES NO If YES, specify _____
ATTENDING: Welcome Reception (Sun. June 19) YES NO
Gala Banquet (Tue. June 21) YES NO

Complimentary Booth Staff - *Bronze Sponsors Only*

NAME _____ EMAIL _____
CITY/PROVINCE _____ COUNTRY _____
DIETARY RESTRICTIONS YES NO If YES, specify _____

Complimentary Booth Staff - *Silver, Gold, Platinum and Diamond Sponsors Only*

NAME _____ EMAIL _____
CITY/PROVINCE _____ COUNTRY _____
DIETARY RESTRICTIONS YES NO If YES, specify _____
ATTENDING: Welcome Reception (Sun. June 19) YES NO

Complimentary Booth Staff - *Gold, Platinum and Diamond Sponsors Only*

NAME _____ EMAIL _____
CITY/PROVINCE _____ COUNTRY _____
DIETARY RESTRICTIONS YES NO If YES, specify _____
ATTENDING: Welcome Reception (Sun. June 19) YES NO



Complimentary Booth Staff - *Platinum and Diamond Sponsors Only*

NAME _____ EMAIL _____
 CITY/PROVINCE _____ COUNTRY _____
 DIETARY RESTRICTIONS YES NO If YES, specify _____
 ATTENDING: Welcome Reception (Sun. June 19) YES NO

Complimentary Booth Staff - *Diamond Sponsors Only*

NAME _____ EMAIL _____
 CITY/PROVINCE _____ COUNTRY _____
 DIETARY RESTRICTIONS YES NO If YES, specify _____
 ATTENDING: Welcome Reception (Sun. June 19) YES NO

Additional Booth Staff - *\$200.00 per person*

NAME _____ EMAIL _____
 CITY/PROVINCE _____ COUNTRY _____
 DIETARY RESTRICTIONS YES NO If YES, specify _____

Additional Booth Staff - *\$200.00 per person*

NAME _____ EMAIL _____
 CITY/PROVINCE _____ COUNTRY _____
 DIETARY RESTRICTIONS YES NO If YES, specify _____

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|-------------------------------|-----------------------|----------|
| Additional Booth Staff | \$200.00 each x _____ | \$ _____ |
| Welcome Reception | \$50.00 each x _____ | \$ _____ |
| Gala banquet | \$95.00 each x _____ | \$ _____ |

Total: \$ _____ (A)

(GST: #132585910)

Add 5% GST(Ax5%): \$ _____ (B)

Subtotal (A+B): \$ _____ (C)

TOTAL AMOUNT(C): \$ _____

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| <p>Payment by Cheque: Make cheque payable to: CBMG Send cheque to: MGCC 2016 Conference Office 4 Cataraqui Street, Suite 310 Kingston, ON K7K 1Z7 Canada</p> | <p>Payment by Credit Card:</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express</p> <p>Card # _____ Expiry: _____</p> <p>Signature: _____</p> |
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IMPORTANT NOTICE FOR CREDIT CARD PAYMENTS
 Credit card payments forwarded to the MGCC 2016 Conference Office via email or telephone will reflect "Events & Management Plus Inc." as the vendor on your statement.

