

# 2012 ASLO AQUATIC SCIENCES MEETING REGISTRATION FORM

Please mail completed registration form and payment to: ASLO Business Office, 5400 Bosque Blvd, Suite 680, Waco, Texas 76710-4446, USA. Registrations with purchase order or credit card information that are not accompanying an abstract submission can be faxed to: 254-776-3767. Make checks payable in U.S. dollars and drawn on a U.S. bank to: **ASLO**. Please print or type.

LAST NAME	FIRST NAME	MIDDLE INITIAL	
INSTITUTE OR ORGANIZATION			
DEPARTMENT OR FIRST ADDRESS LINE			
SECOND ADDRESS LINE			
CITY	STATE/PROVINCE	ZIP	COUNTRY
E-MAIL	PHONE	FAX	

**FEES (IN U.S. DOLLARS AND PER PERSON):**

*Non-member participants may register at the reduced ASLO member rates if registration is accompanied by an ASLO membership form. Additional fees will be applied if registering on-site.*

- ASLO Members (received on or before 7 March 2012) ..... \$495.00 USD \_\_\_\_\_
- ASLO Emeritus Members (received on or before 7 March 2012) ..... \$250.00 USD \_\_\_\_\_
- Non-Members (received on or before 7 March 2012)..... \$595.00 USD \_\_\_\_\_
- ASLO Early Career Members (received on or before 7 March 2012)..... \$300.00 USD \_\_\_\_\_
- ASLO Student Members (received on or before 7 March 2012) ..... \$295.00 USD \_\_\_\_\_
- Non-Member Students (received on or before 7 March 2012) ..... \$395.00 USD \_\_\_\_\_
- Spouse/Guest (received on or before 7 March 2012. Spouses/guests are not admitted to the sessions.) ..... \$75.00 USD \_\_\_\_\_

Spouse/Guest Name: \_\_\_\_\_

- One-Day Registrations ( Monday  Tuesday  Wednesday  Thursday  Friday)
  - ASLO Student Members (received on or before 7 March 2012; No abstract submission) ..... \$150.00 USD \_\_\_\_\_
  - Non-Member Students (received on or before 7 March 2012; No abstract submission) ..... \$250.00 USD \_\_\_\_\_
  - ASLO Members (received on or before 7 March 2012; No abstract submission) ..... \$250.00 USD \_\_\_\_\_
  - Non-Member (received on or before 7 March 2012; No abstract submission)..... \$350.00 USD \_\_\_\_\_
- Developing Country Registration ..... \$100.00 USD \_\_\_\_\_
- High School Teacher/Student Registration ..... \$100.00 USD \_\_\_\_\_
- Late Fee (Must be added to all registrations (except Emeritus Member registration) that are received after 7 March 2012.) ..... \$100.00 USD \_\_\_\_\_
- Emeritus Member Late Fee (Must be added to all Emeritus Member registrations that are received after 7 March 2012.) ..... \$50.00 USD \_\_\_\_\_
- Abstract Fee (Required for registrations accompanied by an abstract submittal.)
  - ASLO Members ..... \$60.00 USD \_\_\_\_\_
  - Non-Members ..... \$80.00 USD \_\_\_\_\_

**Total** \_\_\_\_\_

**PAYMENT:**

- Amount Enclosed
- Bill My Organization. (You must submit a purchase order.)
- Credit Card Payment
  - Visa       MasterCard       American Express

NAME ON CARD \_\_\_\_\_

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**CONFIRMATION:**

A confirmation will be sent to your e-mail address unless you specify otherwise.  
I prefer that my registration confirmation by:  Fax  Mail

**♿ SPECIAL NEEDS:**

If you have a disability or limitation that may require special consideration in order to fully participate, please contact the meeting's planning organization to see how we can accommodate your needs. Call 1-800-929-2756 (USA, Canada & Caribbean) or 254-399-9635 (All other countries) or contact via e-mail at [business@aslo.org](mailto:business@aslo.org)

**ROOM SHARING:**

- I am interested in sharing a hotel room to defray costs.

# 2012 ASLO AQUATIC SCIENCES MEETING ABSTRACT SUBMISSION

The abstract submission deadline is 7 March 2012. (All Internet and mailed submissions must be received by this date. Mailed submissions should be sent in advance so that they are received, not postmarked, by this date.)

To submit your abstract electronically, please point your forms-capable web browser to <http://www.aslo.org/japan2012/>. Stated guidelines and procedures as stated in the Call for Papers must be followed exactly. If not, your paper will not be accepted. Submit the abstract on a CD accompanied by one (1) original hard copy printed on white paper. All documents must be submitted in either WordPerfect for Windows or Microsoft Word for Windows file formats. Abstracts submitted in any other format are not acceptable and will be returned. CDs must be clearly and fully labeled with the name of the author to contact, institution name, mailing address, phone number, and e-mail address. CD submissions must include a hard copy of the abstract, no exceptions. E-mail and fax copies of abstracts are not acceptable.

You may not submit the form in this brochure if you choose to submit via the Internet.

**AUTHOR TO CONTACT: (ONLY ONE ABSTRACT PER FIRST AUTHOR WILL BE ACCEPTED.)**

LAST NAME	FIRST NAME	MIDDLE INITIAL
INSTITUTE OR ORGANIZATION		
DEPARTMENT OR FIRST ADDRESS LINE		
LAST ADDRESS LINE		
CITY	STATE/PROVINCE	ZIP
COUNTRY		
E-MAIL	PHONE	FAX

## PRESENTATION PREFERENCE:

Oral       Poster

Session Topic Code (Please reference listing in this brochure.):

Choice 1: \_\_\_\_\_ Choice 2: \_\_\_\_\_ Choice 3: \_\_\_\_\_

If "Other," please indicate keywords: \_\_\_\_\_

I am willing to serve as a session chair for a general session.

## CONFIRMATION OF ACCEPTANCE:

You will be notified of acceptance by e-mail unless otherwise noted here. Please notify me by  Mail  Fax

## STUDENT TRAVEL GRANT

I am applying for a Student Travel Grant. I have completed the registration, abstract submission, and student travel award forms.

## EARLY CAREER TRAVEL GRANT

I am applying for an Early Career Travel Grant. I have completed the registration, abstract submission, and early career travel grant forms.

## ADDITIONAL AUDIO-VISUAL REQUIREMENTS:

Computer projection equipment, an overhead projector, and a screen will be provided. Please indicate below if you need additional equipment.

Other (List any additional audio-visual equipment that you consider necessary for your presentation. Please note that any special requests for audio-visual should be made when the abstract is submitted. Any costs for these additional items will be billed to the author on this form.):

In order to be considered as complete, the registration form, full registration fee and abstract submittal fee must accompany the abstract form. Mail the completed abstract submission form, completed registration form, payment of fees, CD, and one (1) copy of the abstract to:

2012 ASLO Aquatic Sciences Meeting  
c/o ASLO Business Office  
5400 Bosque Boulevard, Suite 680  
Waco, Texas 76710-4446, USA

Checks should be in U.S. dollars and drawn on a U.S. bank. Make checks payable to: ASLO.

# 2012 ASLO AQUATIC SCIENCES MEETING STUDENT TRAVEL GRANT

Please print or type.

\_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE INITIAL

\_\_\_\_\_  
INSTITUTE OR ORGANIZATION

\_\_\_\_\_  
DEPARTMENT OR FIRST ADDRESS LINE

\_\_\_\_\_  
LAST ADDRESS LINE

\_\_\_\_\_  
CITY STATE/PROVINCE ZIP COUNTRY

\_\_\_\_\_  
E-MAIL DAYTIME PHONE (INCLUDE COUNTRY CODE) FAX

\_\_\_\_\_  
TYPE OF DEGREE SOUGHT EXPECTED DATE OF COMPLETION

\_\_\_\_\_  
TITLE OF PAPER

\_\_\_\_\_  
FACULTY ADVISOR: NAME, PHONE NUMBER, FAX NUMBER

\_\_\_\_\_  
FACULTY ADVISOR: E-MAIL ADDRESS

Yes  No I am a full-time student and member of ASLO.

Yes  No I have previously received a student travel award from ASLO.

Yes  No I have attended an ASLO meeting in the past.

\_\_\_\_\_  
STUDENT'S SIGNATURE DATE

**Please complete this form and attach the following to this application:**

1. Abstract of paper according to specifications on the abstract form
2. Copy of completed abstract submission form
3. Registration form
4. Payment of the student registration fee

**Important Dates to Remember**

- Abstract Submittal Deadline ..... 7 March 2012
- Student & Early Career Travel Grant Recipients Notified ..... April 2012
- Presenters Notified..... May 2012
- Meeting Schedule Posted on Web Site ..... May 2012
- ASLO Aquatic Sciences Meeting..... 8-13 July 2012

# 2012 ASLO AQUATIC SCIENCES MEETING EARLY CAREER TRAVEL GRANT

Please print or type.

\_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE INITIAL

\_\_\_\_\_  
INSTITUTE OR ORGANIZATION

\_\_\_\_\_  
DEPARTMENT OR FIRST ADDRESS LINE

\_\_\_\_\_  
LAST ADDRESS LINE

\_\_\_\_\_  
CITY STATE/PROVINCE ZIP COUNTRY

\_\_\_\_\_  
E-MAIL DAYTIME PHONE (INCLUDE COUNTRY CODE) FAX

\_\_\_\_\_  
CURRENT POSITION EMPLOYER (IF DIFFERENT FROM ABOVE)

\_\_\_\_\_  
TITLE OF PAPER

Yes  No I am a member of ASLO.

Yes  No I have attended an ASLO meeting in the past.

\_\_\_\_\_  
APPLICANT SIGNATURE DATE

**Please complete this form and attach the following to this application:**

1. Abstract of paper according to specifications on the abstract form
2. Copy of completed abstract submission form
3. Registration form
4. Payment of the registration fee
5. Brief paragraph describing your current funding situation and your need for funding to attend this meeting

**Important Dates to Remember**

- Abstract Submittal Deadline ..... 7 March 2012
- Student & Early Career Travel Grant Recipients Notified ..... April 2012
- Presenters Notified..... May 2012
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# 2012 ASLO AQUATIC SCIENCES MEETING EXHIBITOR APPLICATION

This form will reserve exhibit space at the 2012 ASLO Aquatic Sciences Meeting and will become a binding contract upon completion and submission of this form.

**EXHIBIT SPACE RENTAL FEE:** The rental fee for exhibit space is \$2,000 USD for commercial (for-profit) companies and \$1,000 USD for nonprofit/government organizations per each stand space. The rental fee includes one (1) stand, identification signage, a listing within the "Exhibitors" section of the printed meeting program and participation in the opening reception and poster session receptions associated with this meeting.

**PAYMENT OF FEE:** Full payment of the appropriate fee must be submitted with this application. Please make checks payable to ASLO. Return this completed form with payment to the ASLO Business Office, 5400 Bosque Blvd., Suite 680, Waco, Texas 76710-4446, USA.

Please print or type.

COMPANY/INSTITUTE/ORGANIZATION \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ POSITION \_\_\_\_\_

FIRST ADDRESS LINE \_\_\_\_\_

SECOND ADDRESS LINE \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_ URL/WEB ADDRESS \_\_\_\_\_

Your stand sign should read:

\_\_\_\_\_

For meeting badges, please list the full name of up to four colleagues/co-workers who will be working in your exhibit space:

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

**EXHIBITION FEES (IN U.S. DOLLARS):**

Commercial Exhibit Spaces ..... # of spaces @\$2,000.00 USD per space = \_\_\_\_\_

Nonprofit Exhibit Spaces ..... # of spaces @\$1,000.00 USD per space = \_\_\_\_\_

**Total in U.S. Dollars** \_\_\_\_\_

**PAYMENT:**

Check Enclosed.

Bill My Organization. (You must submit a purchase order.)

Credit Card Payment:

Visa     MasterCard     American Express

Checks should be in U.S. dollars and drawn on a U.S. bank.  
 Make checks payable to: ASLO.

NAME ON CARD \_\_\_\_\_

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

