

## **REGISTRATION**

Please fax this form with your credit card details to: +1 716 634 3215. No cover sheet is needed.

Or, if you prefer, mail this form with payment information (or check/money order) to:

Barry Smith • Department of Philosophy • University at Buffalo • 135 Park Hall, North Campus • Buffalo, NY 14260-4150

Scanned forms may be emailed to: ncor@buffalo.edu

Please print le	egibly. This information will be used for name badge purposes.
Name:	
Affiliation:	
Address:	
Email:	Telephone:
CONFERI	ENCE REGISTRATION
☐ Conferen	ce Registration (No Charge) – KINDLY REGISTER NO LATER THAN FRIDAY, SEPTEMBER 14.
MEALS	
Continental b	reakfast and refreshments will be provided during breaks at no charge to registered participants. Additional made available (with pre-payment) as follows:
Lunch - \$1	10.00 Dinner • \$30.00
PAYMEN <sup>-</sup>	T DETAILS
	oney Order Enclosed  Amount:
Credit Cal Note: Charge v	rd
Credit Card N	lumber: Exp Date:
Cardholder N	ame:
Billing Addres	ss:
Signature:	