

# SDRME

Society of Directors of Research in Medical Education

"Advancing Medical Education through Quality Research"

## 2005 Summer Meeting June 19 - 22, 2005

### Hotel Registration:

- 1-800-278-7488; choose phone option 2; give name of conference as "Society of Directors" and date as June 19-22. [www.semiahmoo.com](http://www.semiahmoo.com)

### Meeting Registration:

- By Mail Kristi Ferguson, Ph.D.  
University of Iowa College of Medicine  
OCRME, 1204 Medical Education Building  
Iowa City, IA 52242-1101  
Phone: (319) 335-8900
- By Fax (319) 335-8904
- By Email [kristi-ferguson@uiowa.edu](mailto:kristi-ferguson@uiowa.edu)

### Personal Information: (please print)

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

### Fees

\$245.00 (includes Reception on June 19<sup>th</sup> and Dinner on June 21<sup>st</sup>)

Yes, I would like to attend the June 19<sup>th</sup> Reception

Yes, I would like to attend the June 21<sup>st</sup> Dinner

Total of additional guests attending:

\_\_\_\_\_ June 19<sup>th</sup> Reception (no additional cost)

\_\_\_\_\_ June 21<sup>st</sup> Dinner (\$30.00 per additional person)

**\$\_\_\_\_\_ Total registration fee and additional guest charges**

### Payment Options

Enclosed is a check (US Currency) made payable to SDRME.

Please charge my credit card for the above amount

Credit Card Information (choose one)  Mastercard  Visa

Card No. \_\_\_\_\_ Exp.Date \_\_\_\_\_

Signature \_\_\_\_\_

(not valid without signature)