

Registration Form

Symposium on Biomedical Technology Development

September 28~29, 2002

University of Maryland, Shady Grove Campus, Building I, Auditorium
9640 Gudelsky Drive, Rockville, MD 20856

Name	(Chinese)	(English)
Organization		
Address		
Tel.	(O)	(H)
Fax.	(O)	(H)
E-mail		

	Before 9/10/02 (per person)	After 9/10/02 (per person)	Vegetarian (Yes or No)	Num. of person	Total
Registration fee (include 09/28 lunch)	\$25	\$30			
Banquet 09/28/02	\$20	\$20			
Total amount					

1. Please mail the registration form and a check payable to **"SCBA"** by 09/10/2002 (no cash, please) :
SCBA, c/o Ms. Pat Oldewurtel
Johns Hopkins Asthma and Allergy Center, Room #1A-62
5501 Hopkins Bayview Circle, Baltimore, MD 21224
Tel: 410-550-2001 Fax: 410-550-2527
2. Registration fee includes program book, lunch (9/28), coffee, soft drink.
3. Please call (8:30~17:00):
Shau-Ku Huang (410-550-2006); Sue-Jane Wang (301-983-3591)
Cathy Wu (202-687-2121); Shiew-Mei Huang (301-827-7688)
Jih Shao (202-895-1931).