

**Health Physics Society Midyear Topical Meeting – Onsite Registration Form
January 21-24, 2007 Knoxville, Tennessee**

Name for badge: (Last) _____(First) _____(Nickname) _____
 Affiliation (for badge)(limit to 18 characters and spaces): _____CHP? Yes No
 Address : _____
 City: _____State: _____Zip/Postal Code: _____
 Business Phone: FAX: _____E-mail: _____
 If Registering - Companion Name: _____

REGISTRATION FEES: (Mark Appropriate Boxes)

- HPS Member (Receptions and Proceedings) \$425.00
- Non-Member* (Receptions and Proceedings) \$495.00
- One Day Only \$225.00
- Student (Receptions and Proceedings) \$ 60.00
- Companion (Receptions) \$ 55.00
- Exhibits Only \$ 25.00
- Additional Copy of the Proceedings \$ 35.00

On-Site Fees

*Includes HPS Associate Membership for year 2007

TECHNICAL TOURS:

- SNS and HFIR (Wed 1-5:30 pm, 1/24) # of Tickets ____ X \$25 _____
- ORISE Hist HP (Wed 1-5:30 pm, 1/24) # of Tickets ____ X \$25 _____

SOCIAL TOURS:

- Night Out (Tues 7-10 pm, 1/23) # of Tickets ____ X \$35 _____

AAHP (Saturday, January 20) AND PEP (Sunday, January 21) COURSES:

- Course 1 – Heat Stress for Health Physicists (Grant Ceffalo, Gary Kephart) \$200.00

8:00–10:00 AM (3 concurrent courses)

- 1-A Uncertainty Calculations for Survey Planning, Instrument Calibration...(*C. Gogolak*)
- 1-B Integrating IN SITU Gamma Spectrometry Applications ...(*E. Abelquist*)
- 1-C Current ANSI and IEC Radiation Detection Instrument Standards, Part 1 (*M. Cox*)

10:30 AM–12:30 PM

- 2-A Operational Health Physics Considerations for Accelerated... (*D.A. Stevenson, etc*)
- 2-B Software Applications for MARSSIM Based Surveys (*H. Downey*)
- 2-C Current ANSI and IEC Radiation Detection Instrument Standards, Part 2 (*M. Cox*)

2:00–4:00 PM

- 3-A Developing & Demonstrating Compli-ance with DCGLs for Subsurface Soils (*J.W. Lively*)
- 3-B Cutting, Dismantling and Demolition Tools Used in D&D Work (*L.O. Waggoner*)
- 3-C RDD/IND Awareness Training for First Responders (*K. Groves*)

8:00–10:00 AM ___/___ = \$60.00 1st 2nd <input type="checkbox"/> Yes, stand by
10:30 AM-12:30 PM ___/___ = \$60.00 1st 2nd <input type="checkbox"/> Yes, stand by
2:00-4:00 PM ___/___ = \$60.00 1st 2nd <input type="checkbox"/> Yes, stand by

PAYMENT INFORMATION–Purchase Orders NOT Accepted for AAHP/PEP or Tour Registration

If paying by check, make payable to:

Health Physics Society VISA MasterCard American Express Discover

Card Number: _____ Exp. Date: _____

Cardholder Name: _____

Signature: _____

Cardholder Address: _____

Federal TAX ID # 04-6050367

Registration Section Total \$ _____
 Technical Program Total \$ _____
 AAHP & PEP Section Total \$ _____
TOTAL FEES \$ _____