

**SIA Study Tour of Sweden REGISTRATION FORM 3-17 September 2002**

Please mail completed form and deposit to: Don Durfee, SIA Headquarters, Michigan Technological University, Department of Social Sciences, 1400 Townsend Drive, Houghton, MI 49931-1295.

I (we) enclose payment for \$800 per person as a deposit to hold \_\_\_\_\_ place(s) for the SIA Sweden Tour.

_____ <b>FIRST PERSON NAME</b>		_____ STREET ADDRESS	_____ WE DESIRE A DOUBLE ROOM.
_____ CITY	_____ STATE	_____ ZIP/POSTAL CODE	_____ I DESIRE A SINGLE ROOM, FOR WHICH I UNDER STAND THERE IS A SUPPLEMENTAL CHARGE
_____ PHONE	_____ EMAIL		_____ I DESIRE TWIN ROOM OCCUPANCY; MY ROOMMATE'S NAME IS:
_____ <b>SECOND PERSON NAME</b>		_____ STREET ADDRESS	
_____ CITY	_____ STATE	_____ ZIP/POSTAL CODE	_____ I / WE HAVE READ THE TOUR CONDITIONS DESCRIBED AND AGREE WITH THEM:
_____ PHONE	_____ EMAIL		_____ SIGNATURE (S)                      DATE
PAYMENT METHOD:    CHECK                      CREDIT CARD (specify type)		VISA                      MASTERCARD                      DISCOVER	
NAME ON CREDIT CARD _____			
AMOUNT ENCLOSED _____ CREDIT CARD # _____ EXP Date _____ (IN U.S. DOLLARS)			
SIGNATURE FOR CREDIT CARD _____			