

**PAYMENT FORM FOR APS CALIFORNIA REGISTRATION
NOVEMBER 13-14, 2009
NAVAL POSTGRADUATE SCHOOL, MONTEREY, CA**

INFORMATION			
<input type="checkbox"/> Dr.	<input type="checkbox"/> Mr.	<input type="checkbox"/> Miss	
<input type="checkbox"/> Prof.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Ms.	
Last name:		First:	Middle:
Affiliation:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	

REGISTRATION FEE'S			
<input type="checkbox"/> Undergraduate - \$10	<input checked="" type="checkbox"/> Postdocs (Cal APS Members) - \$40	<input type="checkbox"/> Retired and Unemployed Cal APS Members - \$40	<input type="checkbox"/> Faculty, Staff and equivalent positions (Other) - \$95
<input type="checkbox"/> Graduate - \$20	<input checked="" type="checkbox"/> Postdocs (Other) - \$50	<input type="checkbox"/> Faculty, Staff and equivalent positions (Cal APS Members) - \$70	

IF PAYING BY CREDIT CARD, FAX THIS FORM TO THE APS AT 301-209-0844, BY OCTOBER 16, 2009

Visa
 MasterCard
 Discover
 American Express
 Diner's Club

Credit Card #

Expiration Date:	Name of Card Holder:	Cardholder's Signature:

Fax this form to the APS at (301) 209-0844 by October 16, 2009

IF PAYING BY CHECK, MAIL THIS FORM AND CHECK MADE OUT TO APS/CALIFORNIA, BY OCTOBER 16, 2009

Payable to "APS/California" (Please postmark by October 16, 2009)
Mail this form and payment to Shirley Chiang at the address shown below:

**Shirley Chiang
Department of Physics
University of California
1 Shields Ave.
Davis, CA 95616-8677**