



**13th Annual Conference of the
International Society for Quality of Life Research
October 10-14, 2006 ~ Lisbon, Portugal**

Meeting Registration Form



* Required Fields.

* First Name	<input type="text"/>
* Last Name	<input type="text"/>
Highest Degree	<input type="text"/>
* Nickname for Badge	<input type="text"/>
Company	<input type="text"/>
* Address	<input type="text"/>
* City	<input type="text"/>
* State/Province	<input type="text"/>
* Zip/Postal Code	<input type="text"/>
* Country	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
* Email	<input type="text"/>

Special accommodations or special dietary needs:

Please Check the appropriate categories.

Registration form and payment must be received by September 12th or you must register on-site

ISOQOL 2006 Registration Fees

Members

	On site
Member	<input type="checkbox"/> US\$479
Reg. Mbr w/06 dues	<input type="checkbox"/> US\$572
Reg. Mbr w/07 dues	<input type="checkbox"/> US\$575
Mbr w/special rate 06 dues	<input type="checkbox"/> US\$505
Mbr w/special rate 07 dues	<input type="checkbox"/> US\$506
Mbr w/retired rate 06 dues	<input type="checkbox"/> US\$516

Mbr w/retired rate 07 dues US\$517

Student Members US\$206

Student Mbrs w/06 dues US\$243

Student Mbrs w/07 dues US\$244

Non-Members

On site

Non-Member US\$593

Student Non-Member* US\$227

To receive the **MEMBER RATE** for the 2006 Annual Meeting, you have to be a member for the 2006 dues year.

*Please provide a letter from your mentor or a copy of your student identification.

Yes, I will attend the Business Meeting on Friday, October 13th, so reserve lunch for me!

Yes, I will attend the "What the Editors Say!" Lunch Session on Thursday, October 12th and purchase a lunch at \$40

October 10 Satellite Meeting "Are Patient Reported Outcomes Ready for Prime Time? The ISOQOL Workshop on PROs and the FDA Draft Guidance for Industry"

ISOQOL Members

On site

Member US\$245

Non-Member US\$270

Student Member US\$110

Student Non-Member US\$135

Training Workshops: [Click Here](#) to view Workshop numbers and descriptions.

Please indicate first, second and third choices below for either the morning session, the afternoon session, or both sessions

Morning Workshop Session 1st Choice 2nd Choice 3rd Choice

Afternoon Workshop Session 1st Choice 2nd Choice 3rd Choice

ISOQOL Member

On site

Full Day Workshop US\$245

1 Half-Day Workshop US\$195

2 Half-Day Workshops US\$270

Non-Member

On site

Full Day Workshop US\$270

1 Half-Day Workshop US\$220

2 Half-Day Workshops US\$295

Student Member*

On site

Full Day Workshop US\$110

1 Half-Day Workshop US\$120

2 Half-Day Workshops US\$145

Student Non-Member*

On site

Full Day Workshop US\$135

1 Half-Day Workshop

2 Half-Day Workshops

 US\$145 US\$170**Social Events: Conference Dinner****On site**

Registrant

 US\$85

Accompanying Person**

 US\$95

Name of Accompanying Person

**Includes Welcome Reception and Conference Dinner.

Mentor/Mentee Program: (Register by August 30, 2006 to get involved in this great program.)I want to get involved in the mentor/mentee program and will be a Mentor Mentee*Please indicate your primary clinical/research interest area* AIDS Epidemiology Pain Behavioral Genetics Gastrointestinal Pharmacology Behavioral Medicine Genitourinary Physiology Biochemistry Health Services Research Psychotherapy Cardiovascular Immunologic Pulmonary Central Nervous System Metabolism Renal Consultation Musculoskeletal Social Systems Endocrine Oncology Women's Health**(To assist us in make suitable matches, please send us your biosketch or CV to info@isoqol.org and type "mentoring program" in the subject line.)***A reception will be offered Thursday evening for those individuals involved in the Mentor/Mentee program. Sign up for the Mentor/Mentee program by August 30, 2006.***Please check the payment method you are using:*****If paying by check or money order, please complete this form, print and mail with payment to the ISOQOL office.******(check should be made payable to ISOQOL - in US dollars only)*** Check Money Order * Credit Card**To submit your registration online, please complete the following information (Mastercard or Visa only):** MasterCard Visa* Credit Card No. * Exp. * Total Amount: U.S.\$