

Please print or type:

Name:					Name for badge:	
FIRST NAME	M.I.	LAST NAM				
AAPG member Ye	es	No	AAPG membe	er #:		
Company name:						
Address:						
City:	Emergen	ICV	State:	Zip:	Country:	
Phone:	Contact		Ema	1.		
(include area code)	_ Phone.				(an email is necessary for re	gistration confirmation)
Spouse/Guest's name:				Na	me for badge:	
I volunteer to judge:		Oral	Poster	Either		
Vegetarian meal:		For other dieta Special reque	2 1	· 1	contact Ms. Caylor at nce.	phone/email on next p
REGISTRATION	FEES	BY SEP	TEMBER 2, 2	016	AFTER SEPT. 2, 201	6 COST
Professional registration, A	APG memb	er	\$275		\$325	\$
Professional registration, no	on-member		\$300		\$350	\$
Unemployed/retired AAPG	member		\$175		\$175	\$
Unemployed/retired non-m	ember		\$200		\$200	\$
One-day AAPG member			\$150		\$150	\$
One-day non-member			\$175		\$175	\$
			• - -		A75	
Spouse/guest registration			\$75		\$75	\$

Check if attending Student Job Expo

Check if attending Sunday Icebreaker

MONDAY NITE EVENTS Please select only one. All are free but limited to 25 people per event. If selected venue filled, you will be waitlisted.

Beer & Ice Cream @ the Pepper Distric	ct (8:30 pm-?)
Wine & Tappas @ Enoteca (6-7 pm)	

Bourbon Cocktail Class @ Wine + Market (6-7 pm) Brewery & Distillery Tour @ Town Branch (6-7 pm)

SPECIAL EVENTS	FEE Tickets	COST
All Division (EMD-DPA-DEG) Luncheon, Tuesday	\$28	\$
Field trip 1: Distillery Hydrogeology, Saturday, Sept. 24	\$80	\$
Field trip 2: Upper Ordovician Reservoir Analogs, Sunday, Sept. 25	\$80	\$
Field trip 3: Sequence Stratigraphy and Coal Geology, Wednesday, Sept. 28	\$80	\$

WORKSHOPS

Workshop 1: Dolomite Reservoir Analysis, Saturday, Sept. 24 \$			\$100		\$ 		
Workshop 2: Unconventional Reservoir Quality Analysis, Sunday, Sept. 25\$15			\$150		\$ 		
Workshop 3: Congress Ne	eds You: Communicating with Le	gislators,	Sun. 1/2 d	ay	\$50		\$
Workshop 4: Geochemistr	y for Shale-Gas, Condensate-Rich	Shales, ('Tight Oil	; Wed0	\$125		\$
PROGRAM ADS		Single	Double	Half	Full	none	
Want to place an ad in our	Meeting Program? Do a Shot!	8					
Single Shot (3.5" x 2")	Half Pint (1/2 page, 4.5" x 7")						\$
Double Shot (3.5" x 4")	Full Pint (full page, 7" x 9")	\$50	\$75	\$125	\$200		
Deadline for recognition in the printed program is Aug. 15. We will contact you about your ad. Use grayscale, 300 dpi.			Total amount enclosed:			\$ 	

GUEST PROGRAM Note: all tours require walking. Please check if attending guest activities.

Monday, Sept. 26:	Tuesday, Sept. 27:
Best of the Bluegrass, Keeneland, (\$35)* Mon. 9 am tour	Mary Todd Lincoln House, Tues. morning (\$10)**
Mon. Lunch: Saul Good, @ 12:30 pm (pay your way)	Lunch: <i>Lexington Diner</i> , @11:30 am (pay your way)
Alltech Lexington Brewery & Distillery Tour, 3 pm (\$10)**	Downtown walking tour, Tues. afternoon (no charge)

* preregister at Bluegrass Horse Farm Tours (select 9 AM tour), and note bus pick-up time; ** fees collected onsite

By registering for the Eastern Section meeting, I release and agree to indemnify the AAPG Eastern Section, the Geological Society of Kentucky, the University of Kentucky, and the agents, officers, servants, and employees of each, from all liability for any loss, damage, or injury sustained by me while involved in any way with the meeting except that the AAPG Eastern Section, the Geological Society of Kentucky, and the University of Kentucky are not released from such liability to the extent the same is caused by its actual negligence or willful misconduct.

I have carefully read and understand this waiver and release.

Registration fee includes admission to all technical and poster sessions, exhibits, and ice breaker. All amounts in U.S. Dollars. Payment must accompany registration form. Refunds, less a \$25 administrative fee, are available for cancellation requests received by Sept. 2, 2016. NO REFUNDS AFTER SEPTEMBER 2, 2016.

Per University regulation, under no circumstance should credit card information be submitted via email.

You can either mail, fax or call 859-257-2820 to give your credit card number verbally to Ms. Caylor.

Mail or FAX **BOTH PAGES** of this form and payment information to:

Attn: Geaunita Caylor UK/OISTL 504 Rose St., 107 MMRB Lexington, KY 40506-0107	FAX: 859-257-2173 (please call or email Ms. Caylor to confirm receipt of your fax). For questions please contact: Geaunita Caylor, Program Coordinator: Phone: 859-257-2820 Email: g.caylor@uky.edu			
Please make c	hecks payable to: University of Kentucky UK EIN 61-6001218			
Credit Card: Visa Master C	ard Discover American Express			
Name on Card:	Card Number:			
Signature:	Expiration Date:			