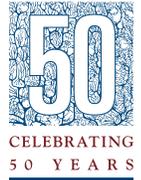




ANNUAL MEETING REGISTRATION FORM

Society for Neuroscience 49th Annual Meeting
 October 19–23, 2019 | Chicago, IL

1969–2019



ONLINE: SfN.org/Registration

**MUST BE RECEIVED BY
 TUESDAY, OCTOBER 2; AFTER
 THIS DATE FEES INCREASE —**

If registering by fax, telephone, or mail

FAX:

Fax registration form and credit card information to (508) 743-9671.

TELEPHONE:

Have your registration form and credit card information in hand and dial (888) 736-6690 or (508) 743-8563.

MAIL:

Send your registration form and fee(s) to:
 SfN 2019 Registration
 c/o Convention Data Services
 7 Technology Park Drive
 Bourne, MA 02532

**COMPLETE ENTIRE FORM. ALL INFORMATION IS REQUIRED.
 PLEASE PRINT CLEARLY. ONE APPLICATION PER REGISTRANT.**

FIRST NAME _____ LAST NAME _____ DEGREE _____

DEPARTMENT _____

INSTITUTION / COMPANY _____

STREET ADDRESS (INCLUDE ROOM NUMBER OR MAIL STOP NUMBER) _____

CITY _____ STATE / PROV. _____ COUNTRY _____

ZIP / POSTAL CODE _____ EMAIL _____

COUNTRY CODE (IF OUTSIDE U.S.) _____ PHONE _____

COUNTRY CODE (IF OUTSIDE U.S.) _____ FAX _____ MEMBERSHIP NUMBER _____

REGISTRATION CATEGORY (CHECK ONE) *MUST COMPLETE SfN MEMBERSHIP #

Registration Category	Advance	Online Discount Opens Oct. 3	On-site In Line Opens Oct. 19
<input type="checkbox"/> Member*(AE)	\$ 420	\$485	\$580
<input type="checkbox"/> Member Category II*(AE)	\$ 175	\$205	\$245
<input type="checkbox"/> Member Category III*(AE)	\$ 245	\$275	\$320
<input type="checkbox"/> Post-doc Member*(HE)	\$ 315	\$360	\$435
<input type="checkbox"/> Post-doc Member, Category II*(HE)	\$ 110	\$130	\$150
<input type="checkbox"/> Post-doc Member, Category III*(HE)	\$ 175	\$200	\$240
<input type="checkbox"/> Student Member*(BE)	\$ 210	\$240	\$290
<input type="checkbox"/> Student Member Category II*(BE)	\$ 75	\$85	\$105
<input type="checkbox"/> Student Member Category III*(BE)	\$ 115	\$135	\$165
<input type="checkbox"/> Student Member Undergraduate*(KE)	\$ 105	\$120	\$145
<input type="checkbox"/> Student Member Undergraduate Category II*(KE)	\$ 40	\$45	\$55
<input type="checkbox"/> Student Member Undergraduate Category III*(KE)	\$ 60	\$70	\$85
<input type="checkbox"/> Nonmember(CE)	\$ 755	\$870	\$1,045
<input type="checkbox"/> Student Nonmember,** Must complete eligibility section at left(DE)	\$ 380	\$435	\$520
<input type="checkbox"/> Guest — Non-Scientific, Must fill in name below(EE)	\$ 65	\$70	\$80
<input type="checkbox"/> CME Accreditation.....	\$ 105	\$120	\$140

GUEST FIRST NAME _____ GUEST LAST NAME _____

DAY ATTENDING: Select day (Must select one):

- Saturday, Oct. 19 Sunday, Oct. 20 Monday, Oct. 21
 Tuesday, Oct. 22 Wednesday, Oct. 23

OPTIONS:

- Continuing Medical Education Credit (CME)
 Check the box above if you have included payment.

CME: visit SfN.org/cme for details. \$ 105 \$ _____

**** STUDENT NONMEMBER
 ELIGIBILITY — MUST BE SIGNED
 BY DEPARTMENT HEAD OR DEAN**

"I certify that this student is presently enrolled at this university and is working toward a degree in the field of neuroscience."

 PRINT NAME OF DEPARTMENT HEAD OR DEAN

 SIGNATURE OF DEPARTMENT HEAD OR DEAN

 PHONE

 EMAIL

ADA Check here if you have special needs or disabilities that may affect your participation in the annual meeting, and append a statement regarding your disability-related needs.

DEMOGRAPHIC INFORMATION

1. NEUROSCIENCE SUB-DISCIPLINE (SELECT ALL THAT APPLY)

- A. Behavioral Neuroscience
- B. Bioinformatics / Neuroinformatics
- C. Cellular and Molecular Neuroscience
- D. Cognitive Neuroscience
- E. Computational Neuroscience and Modeling
- F. Developmental Neuroscience
- G. Disorders of the Nervous System
- H. Evolutionary and Comparative Neuroscience
- I. Excitable Membranes and Ion Channels
- J. History, Teaching, Public Awareness, and Societal Impacts in Neuroscience
- K. Motor Systems Neuroscience
- L. Neural / Synaptic Structure and Function
- M. Neuroendocrinology
- N. Neuroengineering and Robotics
- O. Neuroethology
- P. Neuropharmacology and Neurochemistry
- Q. Neuroregeneration and Repair
- R. Neuroscience of Aging
- S. Sensory Systems Neuroscience
- T. Techniques and Methods
- U. Other: _____

2. TOPICAL TRACK: (LIST "1" FOR PRIMARY INTEREST AND "2" FOR SECONDARY INTEREST)

- A. Development
- B. Neural Excitability, Synapses, and Glia
- C. Neurodegenerative Disorders and Injury
- D. Sensory Systems
- E. Motor Systems
- F. Integrative Physiology and Behavior
- G. Motivation and Emotion
- H. Cognition
- I. Techniques
- J. History and Education

3. WHICH BEST DESCRIBES YOUR TYPE OF EMPLOYER?

- A. Undergraduate College
- B. Graduate School or University
- C. Medical, Veterinary, or Dental School
- D. Independent Research Institute
- E. Government
- F. Hospital
- G. Biotech or Pharmaceutical Company
- H. Nonprofit Organization
- I. Other Private Sector Entity
- J. Self-Employed
- K. Not Employed / Student
- L. Other: _____

4. PRODUCT CATEGORY INTEREST (SELECT ALL THAT APPLY):

- A. Bio-Chemicals and Reagents
- B. Computer-Related Instruments
- C. Imaging / Optical Instruments
- D. Laboratory Equipment and Supplies
- E. Physiological Instruments
- F. Publishers
- G. Pharmaceuticals
- H. Other: _____

5. PURCHASE ROLE (SELECT ALL THAT APPLY):

- A. Approve Purchase
- B. Specify Products / Vendors
- C. Recommend Products/Vendors
- D. No Role

6. HOW MUCH TOTAL TIME DO YOU SPEND VISITING EXHIBITS?

- A. 1 Hour
- B. 2 Hours
- C. 3 Hours
- D. 4 Hours
- E. 5 Hours
- F. 6+ Hours

7. HOW FREQUENTLY DO YOU ATTEND SfN'S ANNUAL MEETING?

- A. Every year
- B. Every other year
- C. When funding permits
- D. First time
- E. Other: _____

8. INDICATE THE EXPENSE BUDGET THAT YOU PERSONALLY ADMINISTRATE:

- A. \$1 million or more
- B. \$500,000 to \$999,000
- C. \$250,000 to \$499,000
- D. \$150,000 to \$249,999
- E. \$75,000 to \$149,999
- F. \$25,000 to \$74,999
- G. \$24,999 or less
- H. Not Applicable

9. WHICH OF THE FOLLOWING TYPES OF PRODUCTS DO YOU USE IN YOUR RESEARCH OR PRACTICE (SELECT ALL THAT APPLY)?

- A. Animal behavioral monitoring
- B. Animal care and surgery
- C. Cell culture
- D. Electrophysiological equipment
- E. Human brain imaging (fMRI, PET, ERP, MEG, etc)
- F. Microscopy and cellular imaging
- G. Pharmacological reagents
- H. Proteins chemistry, including antibodies and other immunological reagents
- I. Specialized scientific software
- J. Not applicable

OPTIONAL DEMOGRAPHIC INFORMATION

The optional demographic information is requested to enable SfN to better understand the changing demographics of our membership which, in turn, will help us enhance programs and services to meet the evolving needs of members. The following questions are optional and will not be encoded on registration badges; nor used to specifically identify registrants.

10. AGE (OPTIONAL, SELECT ONE):

- A. 18-25
- B. 26-35
- C. 36-45
- D. 46-55
- E. 56-over

11. GENDER (OPTIONAL, SELECT ONE):

- A. Female
- B. Male
- C. Prefer not to answer

12. RACE (OPTIONAL): INTENDED FOR U.S. RESIDENTS ONLY

Ethnicity (select one):

- A. Hispanic or Latino
- B. Not Hispanic or Latino

Race (select all that apply):

- A. American Indian or Alaska Native
- B. Asian
- C. Black or African American
- D. Native Hawaiian or Other Pacific Islander
- E. White