General Information
(The application is on the following page).

REGISTRATION FEE: $25 for participants [$10 for students]
Reduced fees available for 1-day only admission [$15/ ($7 students)].
This fee includes refreshments, lunch and conference materials.

Please make check payable to: UNIVERSITY OF HAWAI‘I.
Mail with the registration form to:
   University of Hawai‘i Conference Center
   2530 Dole St., C403,
   Honolulu, HI 96822.

The deadline for registration is 21 October 2005.

Form of payment must accompany the registration. Credit card numbers submitted with
registration will be processed upon receipt. Registrations will not be processed without payment.

Government purchase orders with authorized signature will be accepted and must
accompany the registration form. Participants registering by purchase order will be billed
for nonattendance unless notification of withdrawal is made by 2 November 2005.

Requests for refunds will be received at the UH Conference Center by 2 November, in
writing. No refunds will be made thereafter. Refunds will be mailed. Please allow
approximately 3 to 5 weeks for processing.

ACCESSIBILITY ASSISTANCE: If you would like assistance due to a mobility,
hearing, or sight impairment, you are warmly encouraged to contact the Conference Center at 956-8204 by 1 October 2005.

Parking at UH (upper/lower campus) & HPU’s Hawai‘i Loa Campus is included in the
registration fee. Please indicate request on the registration form.

REGISTRATION INQUIRIES: UH Conference Center
   TEL: (808) 956-8204  FAX: (808) 956-3364

http://www2.hawaii.edu/~wertheim/WW2Conference.html
Remember and Reconsidering:
The 60th Anniversary of the End of World War II in Europe & Asia
10-12 November 2005

Feel free to copy this form for additional registrations. Please print or type.

Name: __________________________________________________________

Last First

Affiliation:__________________________________________________________________________

Mailing Address: _____________________________________________________________________

_________________________________________________________________________________

City State Zip code

Phone: ______________________________ ______________________________

business fax

Email address: ______________________________________________

Please check your registration category:

Complete Conference Registration*:  [ ] $25  [ ] $10 for students]

or

One Day Only Conference Attendee:  [ ] $15  [ ] $7 for students]

(Please indicate:  [ ] THU / [ ] FRI / [ ] SAT only)

Total Fee: $______

Form of Payment

[ ] Check made payable to the University of Hawaii

[ ] Purchase order. (Must accompany registration form)

[ ] I hereby authorize University of Hawai‘i the use of my credit card account:  [ ] VISA [ ] MasterCard

Credit Card No.________________________________________________ Exp. date (Mo/Yr)__/____

Signature ________________________________________________________________

Send registration form and payment to: UH Conference Center
2530 Dole St., Sakamaki Hall C403, Honolulu, HI 96822
808.956.8204 [phone]; 808.956.3364 [fax]  UHCC I.D. # C08104

* Speakers should register at the complete rate.

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Accessibility assistance: See general information

Vegetarian request _______________

Request UH/ HPU Campus Parking:  Thurs. [ ]; Fri. [ ]; Sat. [ ].