

Registration Form

Registration fee on/before November 6, 2017 is \$385

Registration fee after November 6, 2017 is \$400

Please submit one form per registrant.

Registration includes continental breakfast on Monday, Tuesday, and Wednesday, lunch on Monday and Tuesday, and coffee breaks, as well as two receptions.

Name:	
Institution/company:	
Address:	
City: State	e/Province:
Country: Zip/I	postal code:
Telephone: FAX	ζ :
E-mail:	
Visa □ MasterCard □ American Express □ Discover □	
Total amount to charge:	Please submit your registration form no later than November 1 by e-mail, fax, or to the address below:
Credit card number:	Gut Health Symposium 1800 S. Oak Street, Suite 100
Expiration date:	Champaign, IL 61820 Fax: 217.398.4119
Signature: ☐ I have enclosed a check paid to the order of: FASS – Symposium on Gut Health	Questions? Contact us at 217.239.3356 or guthealth@assochq.org
FASS – Symposium on Gut Health	

To book a room at the Hilton St. Louis at the Ballpark, please call (314) 421-1776 and refer to the room block name "gut health" to ensure that you receive the proper meeting room rate. All reservations must be made no later than Friday, October 13, 2017.

To be eligible for a refund of meeting registration fees, requests must be received in writing. If the request is received on or before November 1, 2017, the registrant will receive a full refund. If the request is received after November 1, 2017, NO REFUND will be issued.