

REGISTRATION FORM



Time Use and Economic Well-Being

OCTOBER 28–29, 2005

Name

Title

Institution

Address

Phone

Fax

E-mail

Note: If you are making reservations for more than one person, please send complete information for each person who will attend.

Conference registration fee: \$50 per person

I will attend on: ☐ Friday, October 28 ☐ Saturday, October 29

I will be present for the following meals:

	October 28	October 29	
Continental breakfast	☐	☐	
Lunch	☐	☐	
Reception	☐	☐	
Dinner	☐	☐	☐ I prefer vegetarian meals.

☐ **Payment enclosed.** Amount enclosed (\$50 per person): _____

Make checks payable to The Levy Economics Institute.

☐ **Bill my credit card.** ☐ Visa ☐ MasterCard

Credit card account number

Expiration date

Name as it appears on card

Address (if different from registration form)

Signature of cardholder

Date

Please register by October 21, 2005.