

Intermediate Course for Regulatory Submissions in eCTD Format—October 2017



17–18 October 2017 • New Horizons Learning Center • San Diego, CA • USA

1730121E

Mr. Ms. Dr. First Name _____ MI _____ Last Name _____

Advanced Degree: JD PhD PharmD MD DDS DMD SCD DVM RAC

Title _____

Company _____

Address _____ Suite/Apt. _____

City/ State/Province _____

Mail Stop _____ Postal Code _____ Country _____

Phone (with area/country code) _____

Business Email Address (required for confirmation) _____

Please provide the name and number of an individual to contact in case of an emergency:

Name _____ Phone Number _____

REGISTRATION FEES (All fees in US dollars)

	Register by 15 September 2017	Register between 16 September–13 October 2017
RAPS Member	<input type="checkbox"/> \$1,350	<input type="checkbox"/> \$1,450
List	<input type="checkbox"/> \$1,450	<input type="checkbox"/> \$1,550

METHOD OF PAYMENT

International Wire Transfer: Fax a completed form and copy of bank wire confirmation to confirm your registration to: RAPS account #1000043228997—ABA #061000104—Swift Code SNTRUS3A to: SunTrust Bank, Richmond, VA. Must reference name of registrant. All bank charges are the responsibility of the payer.

Check # _____

Credit Card American Express MasterCard Visa

Account # _____ Exp. Date _____ Security Code _____ Billing Postal Code _____

Name as it appears on the card _____ Signature _____

Questions? Call RAPS Solutions Center at +1 301 770 2920, ext. 200. Please go to www.RAPS.org for complete registration policies and procedures.

HOW TO REGISTER

ONLINE: www.RAPS.org (credit card only)

MAIL: RAPS c/o SunTrust Lockbox Dept.
PO Box 79546, Baltimore, MD 21279-0546

FAX: +1 301 841 7956 (credit card or wire)