

**Kennedy's Disease Association
2007 Conference and Symposium
November 6, 7, and 8**

Researchers and Doctors Registration Form

Print this form, fill it out completely, and mail it to the KDA

Kennedy's Disease Association
P.O. Box 1105
Coarsegold, CA 93614-1105

Important: This registration form does **NOT** register you for your hotel accommodations at the [Golden Nugget Hotel & Casino](#) in [Downtown](#) Las Vegas. You must make these arrangements yourself. The meeting and hotel rooms are in the South Tower and have been blocked until **October 5**.

Hotel Reservation Line: Toll Free – 1-800-846-5336
(Don't forget to mention you're booking for the KDA conference)

Names of Attendees:	E-mail Addresses:	Titles and Research Organization
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Where should we send your meeting confirmation and information packet?

Mailing Address: _____

City: _____ State: _____

Zip Code: _____ Phone Number: (_____) _____

I (We) plan to ...

- Attend the entire conference: _____
- Attend Wednesday and Thursday: _____
- Attend Thursday only: _____
- Attend Wednesday's Dinner: _____
- Participate in the panel discussion: _____
- Participate in the Private Symposium: _____

**Send this form to: Kennedy's Disease Association
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