

CyberTherapy 2003

PRESENTERS Registration Form

January 19 – 21, 2003
San Diego, California, The Inn at Rancho Santa Fe

Please complete and return this form with payment to:

Interactive Media Institute
6160 Cornerstone Court East, Suite 161, San Diego, CA 92121 U.S.A.
Phone: +1-866-822-VRMC • +1 (858) 642-0267 • Fax: +1 (858) 642-0285 • cyberpsych@vrphobia.com • www.vrphobia.com/imi.html

Please circle applicable fee:

	Early Registration Fee (Through October 15, 2002)	Regular Registration Fee (After October 15, 2002)
Full Conference	\$150	\$187
Student Pass*:	\$30	\$45

Please note: Non-presenters cannot use this form

Please print legibly, with your name and degrees as you would like on your badge:

First Name _____ Middle Initial _____

Last Name _____ Degrees _____

Affiliation/Institution _____

Specialty or Department _____

Address _____

City/State/ZIP _____

Country _____ Email _____

Daytime Phone _____ Fax _____

_____ Check Enclosed _____ Visa _____ MasterCard

Card No. _____ Name on Card _____

Signature _____ Exp. Date _____

Make check payable to **Interactive Media Institute**. U.S. funds drawn on a U.S. bank.
Registrations will be refunded, less a \$100 administrative fee, per written request by December 20, 2002. No refunds thereafter.
Registrations are transferable at no additional cost.

CyberTherapy 2003 has arranged a special rate at the conference hotel for a limited number of rooms (1-2 persons) of \$165 + taxes, including free parking. If in need of accommodation, please notify IMI (contact info above) in order to receive service. IMI will make every reasonable effort to accommodate requests received through January 10, 2003.

* Please submit documentation of full-time student status with registration.