

**UW ~ UBC~ SFU**  
**23<sup>RD</sup> Annual Occupational and Environmental Health Conference at**  
**Semiahmoo Resort**  
**January 6<sup>th</sup> and 7<sup>th</sup>, 2011**

Mark your calendars now for the annual joint meeting of the University of Washington / University of British Columbia /Simon Fraser University Occupational and Environmental Health Conference at the Semiahmoo Resort. The program starts at 1:00 PM Thursday, January 6<sup>th</sup> with eclectic, thought-provoking, presentations, and continues to Friday afternoon. The David Bates Memorial Lecturer this year is Dr. C. Arden Pope III, Brigham Young University. A preliminary meeting program will be sent out shortly. This meeting is a great opportunity to get together with our cross border colleagues to discuss current health and safety, research, and practice issues. Student support may be available – check with your supervisor.

This is an “intimate” conference – small enough to allow conversations between researchers and students from both sides of the border. Because it’s small, the registration procedure is a bit different from your typical conference, so please read the instructions carefully to ensure your place at the table. **NEW THIS YEAR!** The UW-UBC-SFU 6<sup>th</sup> Annual Public Health Conference will be held at Semiahmoo on Jan 7-8, with a luncheon speaker, Dr. Howard Frumkin, Dean of the UW School of Public Health, and a joint session on implications of low-level toxicity. Registration for the cross-over workshop can be found on the 3rd page; a separate registration form for the full Public Health conference is available from Karen West, [KLhanson@uwashington.edu](mailto:KLhanson@uwashington.edu).

**Registration for entire OEH conference.** The entire OEH conference consists of presentations on Thursday afternoon, a banquet, room registration, breakfast and presentations on Friday morning. The whole conference fee is rolled into your sleeping room reservation and is paid at check out. However, the details of what you want for dinner, and how we can get in touch with you are handled by the local conference committee – see next page. A separate fee of \$25.76, payable directly to the hotel, is required for the crossover session & lunch with the public health conference.... see pages 2&3.

- Reservation and conference fee instructions:
  - Choose your room: “Classic rooms” Single occupancy = USD\$182.97 or USD\$124.96 per person for sharing. “Water view rooms” Single occupancy = USD\$205.07 or USD\$136.01 per person for sharing. **Rates are inclusive of tax and gratuity.**
  - *Call the hotel directly to reserve your room (1-360-318-2000 or 1-800-770-7992 or FAX 1-360-318-2087). Tell the reservation clerk that you are registering for the “UW/UBC Occupational and Environmental Health Conference”. **NOTE: Bookings must be confirmed by Dec 6<sup>th</sup> 2010.***
  - Fill out the attached registration details sheet (page 2) for the conference organizers. The registration details will be used for conference mailings / contact, a directory of attendees, and for you to indicate your meal preference.
    - **US attendees:** Send attached registration details by email, fax or snail mail to: Alicia Pearce (phone 206 685-3250) email [pearca@uw.edu](mailto:pearca@uw.edu) FAX: 206-616-2687; mailing address: U.W Department of Environmental and Occupational Health Sciences, Box357234, Seattle, WA 98125-7234 [or through campus mail at Box 357234]. For more information call or email Chris Simpson [simpson1@u.washington.edu](mailto:simpson1@u.washington.edu) (206-543-3222) or Janice Camp [jecamp@u.washington.edu](mailto:jecamp@u.washington.edu) (206-543-9711).
    - **Canadian attendees:** Send attached registration details by email, fax or snail mail to: Karen Bartlett (phone 604-822-6019) email [kbartlet@interchange.ubc.ca](mailto:kbartlet@interchange.ubc.ca) FAX: 604-822-9588; mailing address: School of Environmental Health, 2206 East Mall, Vancouver, BC V6T 1Z3. For more information call or email or Anne-Marie Nicol [anicol@interchange.ubc.ca](mailto:anicol@interchange.ubc.ca).

Reservations for the conference must be made by **December 6, 2010** (toll free 1-800-770-7992).

**SEMIAHMOO 2011**  
**OCCUPATIONAL AND ENVIRONMENTAL HEALTH CONFERENCE**  
**REGISTRATION DETAILS FORM –**  
**FAX TO ALICIA 1-206-616-2687 OR EMAIL: PEARCA@UW.EDU**

<b>Name:</b>		<b>Title:</b>			
<b>Mailing Address:</b>			<b>City, Code, Country:</b>		
<b>Phone</b>				<b>Email</b>	
<b>Research/Practice Interests:</b>					
<b>Registered for a room at the hotel?</b>		Yes <input type="checkbox"/> All fees will be paid on check-out		No <input type="checkbox"/> Meeting only charge is <b>\$85.00</b> (includes dinner) and <b>requires prepayment</b> to Hotel (see attached credit card form)	
<b>Conference Registration:</b>		Both Days <input type="checkbox"/>	Day 1 Only <input type="checkbox"/>	Day 2 Only <input type="checkbox"/>	Lunch only Day 2 <input type="checkbox"/>
		<b>see below for single day charges</b>			
<b>Dinner Choices</b> (Dinner included with Hotel/Registration Fee)		Fish <input type="checkbox"/>		Orange-ginger glazed salmon fillet, topped with toasted almonds and served with steamed jasmine rice and asparagus.	
		Chicken <input type="checkbox"/>		Chickan piccata – pan roasted chicken breast covered with a lemon-caper cream sauce served over risotto and seasoned vegetables.	
		Vegetarian <input type="checkbox"/>		Roasted butternut squash cannelloni –squash, caramelized onions, spinach and ricotta cheese baked with marinara and béchamel sauce.	
<b>Allergies or other food requirements:</b>		Provision can be made for special diets.			
<b>Single Day Only</b> (requires prepayment to Hotel – see attached credit card form)		<input type="checkbox"/> Day 1 meeting only, NO DINNER. <b>\$15.00 prepay to hotel.</b>		<input type="checkbox"/> Day 2 meeting only (includes breakfast) <b>prepay to hotel \$30.00</b>	
		<input type="checkbox"/> Day 2 optional cross-over session & lunch <b>prepay to hotel \$25.76</b>			
<b>Guest Attendees</b>		<input type="checkbox"/> Dinner only (no meeting)		<b>Prepay</b> guest dinners directly to Hotel (see attached credit card form) <b>\$38.67</b> this is a <b>separate</b> form from the hotel registration	
<b>Guest(s) dinner choice</b>		Fish <input type="checkbox"/>			
		Chicken <input type="checkbox"/>			
		Vegetarian <input type="checkbox"/>			

**REQUEST FOR BILLING TO CREDIT CARD**

Due to an increase in credit card fraud and protection of the cardholder, we must request that this form be completed in its entirety, including the attachment of all requested items. Failure to complete any of these will result in non-approval. Please be aware the completion of this letter does not ensure approval of your request.  
You are requesting Semiahmoo Resort bill charges to your credit card for the individual functions listed below. Please be certain that all signature requests and copies of identification are clear and legible. Illegible information will result in non-approval of this request. The signature area must be legible.

Group Name: UBC School of Environmental Health

Function Name: UBC/UW Occupational and Environmental Health Conference

Conference Dates: January 6-7-8, 2011

**CREDIT CARD Pre-payment TO BE USED FOR CROSS-OVER SESSION on Jan 7<sup>th</sup>, and/or MEETING ONLY, OR DINNER ONLY FEES.**

- \$71.00 –Both Days Meeting + DINNER (guest name: \_\_\_\_\_)
- \$32.37 –Both Days Meeting Only NO DINNER (guest name: \_\_\_\_\_)
  
- \$15.00 - Day 1 Meeting Only NO DINNER for (guest name: \_\_\_\_\_)
- \$55.00 - Day 1 Meeting Only + DINNER for (guest name: \_\_\_\_\_)
  
- \$30.00 - Day 2 Meeting Only for (guest name: \_\_\_\_\_)
- \$55.00 - Day 2 Meeting + Lunch (guest name: \_\_\_\_\_)
  
- \$25.76 - Day 2 Crossover session & LUNCH Only for (guest name: \_\_\_\_\_)**
  
- \$38.67 - Day 1 Dinner only for (guest name: \_\_\_\_\_)

Your information as it appears on your account

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ Daytime Telephone Number: \_\_\_\_\_

\_\_\_\_\_ Evening Telephone Number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

I authorize Semiahmoo Resort to charge this credit card as indicated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



9565 Semiahmoo Parkway Blaine, WA 98230  
Phone: (360) 318-2000 Fax: (360) 572-0774