



## SAGEEP 2017 Abstract and Extended Abstract Submission Payment Form

Deadline for Abstract and Extended Abstracts Submissions and Fee Payment is **November 30, 2016**.

This form is to be completed and submitted via fax or mail prior to submitting your abstract online to allow processing (you will be contacted when the process is completed and advised of log in instructions). The \$50.00 submission fee will be returned if your abstract is not accepted for presentation at SAGEEP 2017. If your abstract is accepted and presented at SAGEEP 2017, the \$50.00 submission fee will be deducted from your SAGEEP 2017 registration fee. You will be reminded of this credit during the SAGEEP registration process. The abstract submission fee will not be refunded to those whose abstracts are accepted, but who do not register for SAGEEP 2017. Please set up your profile in the online abstract submission site. Once your payment has been processed, we will email you with further online submission instructions.

By submitting your abstract (online) and paying your \$50.00 fee (via this form) by **November 30, 2016**, you are agreeing to participate in SAGEEP 2017 with an oral or poster presentation.

Those abstracts without submission fee payment by the deadline of **November 30, 2016** will be withdrawn from the conference.

### Mail or Fax completed Abstract Submission Payment Form and payment to (please print or type):

EEGS/SAGEEP 2017  
1720 S. Bellaire St., #110  
Denver, CO 80222-4303 USA  
Tel: 303-531-7517  
Fax: 303-820-3844  
Email: staff@eegs.org

Name of Primary Author: \_\_\_\_\_ Email (required): \_\_\_\_\_

Person Submitting Form (if not the author): \_\_\_\_\_ Email (required): \_\_\_\_\_

Company/Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of Abstract: \_\_\_\_\_

Check # \_\_\_\_\_ (Made Payable to EEGS in the amount of \$50.00)

Credit Card Information (your credit card will be charged \$50.00):

Type:  MC  Visa  Discover  Amex

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVV Code: \_\_\_\_\_

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

(Use one form per primary author even if multiple abstracts are submitted. In order to assure accurate credit for the submission fee, information about the presenting author and abstract title must be included on this form.)