



1310 Crooked Hill Road, Suite 800  
Harrisburg, PA 17110  
Phone: 717.963.7303 Fax: 717-238.3081

Dear PHENSA Member,

The spring **2019 PHENSA meeting** is scheduled for **Tuesday, April 9**, from 9:00 am to 3:00 pm at the **Nittany Lion Inn, State College**, 200 W Park Ave, State College, PA 16803. Continental breakfast and registration will begin at 8:30 am. The executive committee will meet Monday, April 8, from 4:30-5:30 pm.

If you are coming in Monday, please remember that you are responsible for making and paying for overnight room reservations at the hotel. Reservations can be made by calling **1-800-233-7505** before **March 8, 2019**. Please mention group code "**PHEN19A**" to receive the reduced room rate of **\$139** per night. You can also reserve online at [www.pennstatehotels.com](http://www.pennstatehotels.com).

The registration fee for the membership meeting is **\$65 per attendee** and students are invited to attend the spring meeting at a reduced cost of **\$40 per student**. Please submit your registration fee and the names of all who will be attending on the attached registration form.

The registration deadline is **Friday, March 15**. **No refunds will be given after that date. All who register but do not attend are responsible for the fee as PHENSA is still charged for breakfast and lunch with the hotel.**

Please confirm our **mailing address** is updated in your accounting system. If you have any questions, please feel free to contact me.

Alexis Kierce  
Account Manager  
PHENSA  
1310 Crooked Hill Road, Suite 800  
Harrisburg, PA 17110  
717.963.7303  
[alexis@thinkgraphtech.com](mailto:alexis@thinkgraphtech.com)

## PHENSA SPRING MEETING 2019 REGISTRATION FORM

Please send your registration fee of **\$65** per attendee or **\$40** for student poster presenters (**payable to PHENSA**) along with the completed form to:

PHENSA c/o Graphtech  
1310 Crooked Hill Road, Suite 800  
Harrisburg, PA 17110

You may email or fax your registration in advance of payment. Simply complete the form below and click on the **"SUBMIT"** button. Or you can fax it to: 717.238.3081

| <b>AFFILIATION:</b> |         |         |                                   |
|---------------------|---------|---------|-----------------------------------|
| #1.                 | Name:   | Phone#: |                                   |
|                     | E-mail: |         | Student: <input type="checkbox"/> |
| #2.                 | Name:   | Phone#: |                                   |
|                     | E-mail: |         | Student: <input type="checkbox"/> |
| #3.                 | Name:   | Phone#: |                                   |
|                     | E-mail: |         | Student: <input type="checkbox"/> |
| #4.                 | Name:   | Phone#: |                                   |
|                     | E-mail: |         | Student: <input type="checkbox"/> |
| #5.                 | Name:   | Phone#: |                                   |
|                     | E-mail: |         | Student: <input type="checkbox"/> |

Please make copies of this form if you have additional attendees. Please notify Alexis Kierce in the PHENSA office ASAP if you have cancellations or substitutions to the attendee roster or you have any dietary or other special needs.

**REGISTRATION DEADLINE: Friday, March 15, 2019**

Check Enclosed  Check to Follow

Receipt Requested:  Email to:

**SUBMIT**