



Society of Toxicologic Pathology Virtual Modular Education Course Registration Form

For Office Use Only
Date Received: _____
Input: Initials: _____

Please select (one): STP Member Nonmember Student Member/Nonmember Member Group Nonmember Group

Please print or type

Name: _____ Degree(s): _____ Is this a new employer?
 Yes No

Organization: _____ Department: _____ Is this a new address?
 Yes No

Street Address: _____

City/State/Zip/Country: _____

Telephone Number: _____ Email Address: _____

Virtual Registration Fees:

STP Member	\$ 795	\$ _____
Nonmember	\$ 995	\$ _____
Student*	\$ 95	\$ _____
STP Member Group Rate [§] <i>(Three or More from the Same Company)</i>	\$ 695	\$ _____
Nonmember Group Rate [§] <i>(Three or More from the Same Company)</i>	\$ 895	\$ _____

*A letter of verification from a department chair must accompany student registration.
[§] To take advantage of the group rate please send your completed registration forms to stp@toxpath.org. All three forms (or more) should be emailed at the same time.

Method of Payment:

Please make all checks or credit charges payable to Society of Toxicologic Pathology in US currency.

Government Purchase Order #: _____ Check or Money Order #: _____
(Government P.O. Form must be attached.)

AMEX Discover MasterCard Visa Credit Card #: _____

Cardholder's Printed Name: _____ Expiration Date: _____ Authorization Code: _____

If cardholder is different from registrant, please include cardholder's email: _____

Mail completed form with payment to:
Society of Toxicologic Pathology, Virtual Modular Registration
 11190 Sunrise Valley Drive, Suite 300, Reston, VA 20191
 Government purchase orders must be mailed with the Registration Form.

*By registering for this course, you are agreeing to the [STP Privacy Policy](#).
 You may opt in/out of email communications from STP at any time.*

STP Headquarters Email: stp@toxpath.org