



**Fall 2007
SeaSonde® Training Course
Attendee Registration and
Payment Authorization
Form**

**Registration and payment must be
received by October 15th**

Training Dates: 23-26 October 2007

Location: UC Davis Bodega Marine Laboratory in Bodega Bay, California

Attendee Information

Name: First: _____ **Last:** _____

Organization Name: _____

Street Mailing Address: _____

City: _____ **State:** _____

Zip/Postal Code: _____ **Country:** _____

Phone: _____ **Fax:** _____

Email: _____

Payment Information

COURSE FEE: Tuition is USD \$750 per person. Payments can be made via check (drawn from U.S. banks only) written to CODAR Ocean Sensors, Visa credit card, or issuance of a Purchase Order from your institution.

Select either Check___, Visa Credit Card___, or Purchase Order___

If paying by Visa, please fill in this Credit Card Authorization section.

Amount of Payment: _____

Visa Credit Card Number: _____

Expiration Date: Month _____ **Year** _____

Cardholder Name (print): _____

Cardholder Signature: _____

Please fax this form to +1 (408) 773-0514 or send an email containing the same information to support@codar.com. Mail check to: CODAR Ocean Sensors, 1914 Plymouth Street, Mountain View, CA 94043 USA, Attn: Bruce Nyden. Purchase Orders should also be submitted via fax or mail.

CODAR Ocean Sensors

1914 Plymouth St., Mountain View, CA 94043 USA Phone: +1 408 773-8240; Fax: +1 408 773-0514