



Registration Form

In-person registration fee on/before October 18, 2024 is \$460

In-person registration fee beginning October 19, 2024 is \$500

Please submit one form per registrant.

Your registration price includes: all oral and poster scientific content, breakfast every day, lunch on Monday and Tuesday, and entrance to two evening networking receptions.

Name: _____

Institution/Company: _____

Address: _____

City: _____ State/Province: _____

Country: _____ Zip/postal code: _____

Telephone: _____ FAX: _____

E-mail: _____

Visa MasterCard American Express Discover

Total amount to charge: _____

Credit card number: _____

Expiration date: _____

CVV (required): _____

Signature: _____

I have enclosed a check paid to the order of:

Symposium on Gut Health

Please submit your registration form
by e-mail, fax, or to the address below:

Gut Health Symposium
1800 S. Oak Street, Suite 100
Champaign, IL 61820
Fax: 217.398.4119

Questions? Contact us at 217.239.3356 or
guthealth@assoqh.org

To book a room at the Hilton St. Louis at the Ballpark, please call (314) 421-1776 and refer to the room block name "gut health" to ensure you receive the proper meeting room rate.

All reservations must be made no later than October 25, 2024.

To be eligible for a refund of meeting registration fees, requests must be received in writing. If the request is received on or before October 6, 2024, the registrant will receive a full refund. If the request is received after October 6, 2024, NO REFUND will be issued.